

Chapter Two

The Teacher Educators and Mentors (TEAM) Model

A Full-Year Clinical Residency Program

Amy Vessel, EdD, and Dawn Basinger, EdD,
Louisiana Tech University

The day-to-day work of a classroom teacher is complex and challenging, as is the work to recruit and prepare Louisiana’s next generation of teachers. Beginning in 2014, as part of a long-term body of work to improve teacher preparation in Louisiana, the Louisiana Department of Education (LDoE) engaged K–12 educators, as well as schools, school systems, and teacher preparation leaders across the state to gather their feedback on teacher preparation experiences and how they can be strengthened.

In July 2014, the LDoE surveyed teachers statewide to inquire about their personal experiences with teacher preparation and classroom teaching. Principals and personnel directors shared experiences of hiring and supporting new teachers, and preparation program faculty shared their experiences collaborating with partner schools and school systems. Survey results highlighted some of the ongoing challenges facing teacher preparation programs and reported ideas from educators as to how school systems and preparation programs can collaborate to improve teacher preparation for future teacher-candidates.

In direct response to this feedback, the LDoE launched Believe and Prepare, which provided \$4.89 million in grant funds to three cohorts of school systems to support closer partnerships between preparation providers and school system leaders to offer aspiring teachers a full year of practice under an expert mentor and a competency-based curriculum. Although three cohorts were to be funded in 2014, seven school systems and seven preparation providers were funded.

In 2015, the program grew to over twenty school systems and over fifteen preparation providers in Cohort 2, and in 2016, Cohort 3 consisted of over thirty school systems and over twenty preparation providers. In three years, over 850 undergraduate teacher-candidates were supported by expert mentors while pursuing certification through a yearlong residency program.

With a long-held vision of high-quality field experiences connected to theory and practice, faculty at Louisiana Tech University's College of Education were more than prepared to charter a path in the early years of the Louisiana State Department of Education's Believe and Prepare Initiative (2014). In fall 2014, the college's clinical director initiated a pilot residency program that included eleven elementary students, two elementary schools, and one school district. Currently, there are clinical residents in all teacher preparation programs, including traditional undergraduate and alternative certification, from early childhood through secondary teacher preparation programs in fifteen schools across twelve school districts.

After more than a decade of clinical work in area schools working alongside school leaders and mentors, the executive director of the Clinical Residency & Recruitment Center (CRRC) joined the former director of clinical experiences to transform the traditional student teaching program into a full-year residency model that included consistent and intentional support for school residency teams. In the spring of 2015, the Teacher Educators and Mentors (TEAM) Model was developed to facilitate this new approach to teacher preparation.

The model continues to evolve as early childhood, elementary, middle, and secondary undergraduate teacher preparation programs are redesigned using a competency-based framework published by the LDoE in 2016 after the Board of Elementary and Secondary Education adopted them in the same year. Louisiana Tech University's master of arts in teaching (MAT) alternative pathway programs are also aligning to the TEAM Model approach.

Louisiana Tech's teacher preparation program follows the Louisiana Department of Education requirements: Elementary, grades 1–5, residents are at their TEAM schools 80 percent (four days/week) of the time from August–May, completing more than 1,000–1,500 clinical hours during their senior year in the four-year undergraduate program. Middle, grades 4–8; Secondary, grades 6–12; and All-Level (K–12) residents are required to spend a minimum of 60 percent (three days/week) participation in schools during the fall and winter, and 80 percent (four days per week) participation during the spring. (LDoE, Updated Teacher Preparation Transition Guide, December 2017, p. 13).

In October 2016, the Louisiana Board of Elementary and Secondary Education (BESE), with support from the Louisiana Board of Regents (BoR),

adopted landmark regulations to expand yearlong residencies (Louisiana State BESE, Bulletin 996, Revised August 2019). Early research on effective residencies (2017) identified the importance of recruitment, strong preparation, ongoing support, and higher teacher retention (Guha, Hyler, & Darling-Hammond). These anchors, along with additional clinical research (Bacharach & Heck, 2012; Danielson, 2015; Wilson, 2006), informed the development of the TEAM Model.

The following will provide insight into the evolution of a traditional student teaching program into a full-year teacher residency program. The chapter will address key components of the TEAM Model, residency program benefits, and recommendations for those redesigning their teacher preparation program.

COMPONENTS OF THE TEAM MODEL

The TEAM Model is much more than an extended student teaching experience. This new program stretches the co-teaching experience across a greater time frame, allowing clinical residents time to process clinical coaching to inform best practices for improvement. If some things take more time to grow, this slower pace of professional growth alleviates the stressful, short timetable of traditional student teaching.

The full-year residency model provides time and opportunity for more deeply educating teacher-candidates, or what the program refers to as clinical resident. In this more holistic approach to teacher preparation, clinical residents are able to engage in activities that “cultivate their capacity to teach with greater consciousness, self-awareness, and integrity” (Intrator & Kunzman, 2006, p. 39).

If future teachers are not prepared to address individual and cultural differences in addition to demonstrating content knowledge and instructional skills, then teacher preparation programs may be inadequately preparing the whole teacher to teach the whole student (Leonard & Basinger, 2008). While some aspects of the residency originated from traditional student teaching, others were created based upon teacher preparation and clinical residency research as well as school and district needs.

REDESIGNED CLINICAL COMPONENTS

TEAM roles. Influenced by the traditional student teaching triad (Yee, 1968), the TEAM Model provides a stronger foundation with multiple stakeholders,

Table 2.1. TEAM Model Roles

<i>Teams</i>	<i>Roles</i>
University Team	clinical director, clinical residency and recruitment center (CRRC) coordinator/clinical liaison, program faculty, university leadership team
District Team	district liaison(s), district supervisors, district leadership team
School Team	lead mentor-teacher, mentor-teachers, special education mentor(s), school leadership team
Residency Team	lead resident, residency team

which in turn increases better support and sustainability. The TEAM roles reflect an expanded version of the traditional student teaching triad of cooperating teacher, student-teacher, and university supervisor. Table 1 provides a visual representation of these roles according to their affiliation: university team, district team, school team, and resident team.

The university-based teacher educator team, or university team, includes the clinical director, who oversees early field experiences and clinical experiences in all initial certification programs, and a coordinator, who manages the CRRC and also serves as the clinical liaison. It is relevant to note that the liaison role was originally assigned to multiple teacher educators, many of whom had retired, who were assigned to a school or district. Now, faculty in the Curriculum, Instruction, and Leadership Department serve in multiple facets of the model from guest speakers to evaluators and to coaches as needed. The university leadership team consists of the clinical director, department chair, associate dean, and dean.

The district team consists of one or more liaisons, district supervisors, and a district leadership team (superintendent, HR director, liaison, etc.). The school team has a designated lead mentor-teacher, other mentor-teachers, a minimum of one special education mentor-teacher, and a school leadership team (typically the principal, vice principal, and sometimes a curriculum coordinator or strategist housed at the clinical setting).

This team reports the individual progress of each resident to the district and university through scheduled communication and TEAM reports. Expectations include regular walkthroughs in all TEAM classrooms, annual state-approved teacher evaluations, and summative recommendations for initial teacher certification.

The residency team is a very important aspect of the model, offering a cohort of peers/residents who are all pursuing initial teacher certification in the same academic year. Face-to-face meetings, as well as Zoom meetings, are conducted throughout the academic year, bringing this team together to

collaborate, reflect, and discuss their professional growth as a group. These experiences are critical to the professional development of effective communication as well as preparing the whole teacher.

All clinical residents are placed in a clinical setting with at least one additional resident. Over time, a clear leader is identified and honored by the clinical director with the title of *lead resident* serving as the key contact of that team. In the table above, a residency team may have as many as six teacher educators coaching them over a full academic year.

Clinical liaison. While the TEAM Model organizational chart has gone through various changes as a result of various pilots over the years, one key role, the clinical liaison, has served an important role within clinical partnerships. That role was adapted from the University of Alabama's Clinical Master Teacher Model (Wilson, 2006; Daane, 2012).

Clinical liaisons represent the university and teacher educator teams in making the best decisions, communicating regularly, and meeting throughout the year as needed to make adjustments in placements and any policy changes. Most importantly, the liaisons hold all TEAM members accountable for meeting the expectations of their role in the residency program.

In the early stages of the TEAM Model, each school district had one grant-funded clinical liaison. Now, each district funds its own liaison. As the program has grown and expanded across the state into multiple districts and schools, the university created a budget line for one university clinical liaison to communicate and support each school-based team.

Office redesign. The CRRC was established in fall 2015 as a resource center for all members of the TEAM, and it continues to support TEAM members through educational programming, conferences, celebrations, community service, and social media. The clinical director and the university liaison are housed in this physical space on campus. A clinical classroom is provided across the hall for all mentor training, professional development, and clinical classes and consultations.

The center's website, latechcrrc.org, is the hub of communication. The website houses clinical resources for TEAM members to use, and each clinical partnership team has a page to spotlight successes. The CRRC was initially funded as part of a Louisiana Department of Education grant. The grant provided time for university leaders to review the current clinical experiences budget, reprioritize funding needs, and establish a new system for funding residencies.

Additional support was provided during the transition years by BESE in the form of an annual mentor and resident stipend. In 2019–2020, BESE continued to provide mentor stipends, but each district committed to resident

stipends paid in two installments (December and May). This collaborative funding by all TEAM members has allowed sustainability for the program.

Clinical partnerships. Developing rich clinical partnerships through constant communication has been a key to this statewide initiative to improve teacher preparation programs and provide a pipeline for new teachers in Louisiana. Louisiana Tech University was one of three pilot programs that grew from one to twelve clinical partnerships across the I-20 Corridor of North Louisiana in five years.

Memorandum of Understandings (MOUs) are a growing educational trend for all collaborative projects, and MOUs are signed annually between the university and each district detailing expectations of each party. Discussions of the upcoming academic year begin six months prior to the beginning of the new school year, and leaders from both entities sign the formal documentation after annual partnership meeting discussions, clarifications, etc.

Partnerships have existed for decades with many school districts, but the collaboration, communication, and joint ventures have increased each year. New districts from across the state contact the university to begin partnership discussions. Leadership teams from each district meet to share goals, prepare MOUs, establish partnerships supporting residencies, grant projects, teacher recruitment, and more.

Mentor training. Research demonstrates that mentor training is essential for successful clinical experiences (Sutcher, Darling-Hammond, & Carver-Thomas, 2016; Vessel, 2005). In 2015–2016, TEAM Model mentor training was provided by the authors, and more than one hundred school-based teacher educators attended. Mentor training curriculum was collaboratively designed, including research-based strategies from the St. Cloud Co-Teaching Model, Roles of the TEAM, Full-Year Residency Best Practices, the Danielson Framework/TEAM Evaluation, Generational Differences, and Clinical Coaching.

To date, more than four hundred mentors have been trained across twelve partnerships. Three years ago, the state began a nine-day state mentor training and now provides an ancillary certificate for mentors that requires the completion of a portfolio assessment. This state training is in addition to the training already offered by the CRRC. Louisiana Tech University is currently the only university in the state to be approved to offer both mentor and content leader professional development for state educators, and all training is provided online with face-to-face optional learning opportunities. While required state certification emphasizes the importance of the role of mentor, TEAM training with all new mentors will remain a priority as state training is more generalized to all types of mentoring.

RESIDENCY MODEL: ESSENTIAL COMPONENTS

TEAM school growth. The model established a protocol with each new district beginning with two distinct clinical settings: one elementary TEAM school and one secondary TEAM school. In the past five years, some districts have grown to more than one elementary, secondary, or middle school clinical setting, but many have built a strong foundation in the original TEAM school.

To establish a TEAM of teacher-candidates and school-based educators, a minimum of two candidates should be at one school site. For example, during the 2018–2019 academic year, there were twelve school districts and twenty-one schools. One district had one K–8 TEAM school supporting both elementary and middle/secondary teacher-candidates, while another district had six TEAM schools: three elementary, one middle school, and two high schools.

In one urban district, three residents began at the designated elementary school, and two began at the designated high school. Now, four years later, the elementary school boasts seven residents where one alumna is successfully teaching and serving as a mentor. At the high school, numbers have tripled hosting six residents this year in four secondary programs (mathematics, science, health and physical education, and English). Because English residents requested the same district, a second TEAM high school to be identified by the stakeholders. At mid-term, all three TEAM schools are thriving, and the new school has received some extra attention as all members are learning the accountability system.

Residents' geographic locations influence their placements. Many choose to return to their home, and the districts seek these residents hoping they will choose to remain in that district after their residency. Districts are excited to have the entire academic year to know the resident's knowledge, skills, and dispositions and determine if they are the right fit for its schools. In another very strong partnership, there was one year with no residents, simply due to the geographical location. Rural districts, especially, are providing incentives such as mileage and additional stipends to recruit them. Recruiting continues to have a clear alignment to residents' future hiring preferences.

Full-year co-teaching environment. Building upon St. Cloud State University's Co-Teaching Model (Bacharach, Heck, & Dahlberg, 2010) and its professional development sessions, Louisiana Tech University's College of Education provides its own development opportunities. Teacher-candidates and mentor-teachers participate in co-planning, co-teaching, and co-assessment training that is expected to be used throughout the academic year.

In addition, teacher-candidates and mentor-teachers receive professional development for collaboration in instructional teams and student achievement strategies. Adaptations were made to the co-teaching model to accommodate a full-year residency schedule within the university's quarter system. Both the resident and mentor-teacher seem to thrive in this environment, even making evaluations less stressful.

A TEAM approach to evaluation. Multiple summative and formative evaluations are conducted throughout the entire academic year to measure growth and ensure the success of all clinical residents, including a team approach to quarterly reporting. The TEAM is trained to use the nationally recognized Danielson Framework for Teaching Tool (FFT) (2015), as the primary formal evaluation tool, with crosswalks to other national standards (i.e., INTASC, CLASS, TAP, etc.). The FFT is introduced to teacher-candidates early in the program and used as the evaluation instrument during practicum and residency. It is also an integral part of the training that mentor-teachers participate in before and during the clinical residency.

Resident evaluations occur in fall (August–November), winter (December–February), and spring (March–May). Similar to medical or other professional programs, teacher-candidates complete three clinical rotations, or residencies, mastering the skills of an effective teacher from August to May. During each quarter, a team of two to three mentor-teachers and university faculty observe and provide feedback as the resident provides evidence of professional growth. Such coaching by the mentor-teachers has shown to be an empowering experience (Wilson, 2006; Daane, 2012).

The resident also completes a self-assessment, and all school leaders commit to complete the state-approved teacher evaluation. The protocol for clinical evaluations begins as early as the sophomore year in methodology and practicum courses and includes a pre-conference form, lesson plan, post-conference form, and actionable feedback conference form. University faculty are involved in all aspects of clinical coaching, from professionalism to specific content. Informal feedback protocols are additionally available for all TEAM members.

Recent clinical research supports digitally mediated supervision in the form of self-reflection, walkthroughs, focused feedback, and formal evaluation (Hodges & Baum, 2019). The addition of SWIVL technology to the TEAM Model in the fall of 2018 bridged the gap as the program was able to grow beyond a sixty-mile radius. A customized account allows all residents to *tag* their videos with any of Danielson's classroom management and instructional indicators. This process makes it very easy for the clinical coaches to locate the evidence, and it is highly beneficial to the residents as they learn the four domains of teaching associated with the Danielson Framework.

Communication via technology. Danielson (2015) emphasized the importance of communication during the clinical coaching process of teacher preparation: “Conversations about teaching occur between teaching partners; between teachers and their mentors, coaches, or supervisors; and within teaching teams or professional learning communities” (Danielson, 2015, p. 38). Team conversations are critical and take place constantly between all stakeholders. Technology is greatly assisting the growth of clinical partnerships across the state. All clinical video evaluations are captured by SWIVL technology.

All clinical documentation is paperless, captured by Survey Monkey and Google Doc tools. Clinical liaison meetings were originally face-to-face, but they are now recorded through Zoom video conferences. Communication trees were originally on the Group Me, but have changed to other app options, such as Band. Using communication via technology has saved time and money.

Mentor selection and placements. Determining the best match of mentor-teacher to clinical resident is essential in making a full-year clinical placement. For that reason, a timeline begins with the mid-year recruitment event in January, where all clinical partners have the opportunity to meet upcoming residents. Faculty audit candidates’ plans of study to determine eligibility before candidate applications are submitted.

In the state of Louisiana, residency certificates are now required for all candidates before the beginning of the residency. In early spring, university and district clinical partnership meetings take place, mentor-teachers are recommended by both the university and school partners, and TEAM schools are identified. Training begins for residents and mentors in late spring, and placements are typically finalized in the summer months.

The district and university leaders take much time and care in determining the best mentors to serve for the upcoming residency program. Purposeful matching of the mentor and resident is essential for a successful nine-month co-teaching collaboration. A clinical style inventory has been piloted for a few years to support quality, purposeful matching of residents to mentors for the full-year residency experience.

Initial results have shown that common traits in the mentor and resident have caused an increase in earlier co-planning, co-teaching, and co-assessment. In addition to the mid-year recruiting event, the CRRC hosts other recruitment events.

Recruitment events. The center hosts a variety of special events throughout the academic year to spotlight and bring prestige to the teaching profession. These have become part of a recruiting effort to engage middle school, high school, and potential college transfer students to consider teaching. Every

fall, Dot Day is celebrated, adapted from Peter Reynolds (2003) award-winning children's book, *The Dot*, where all TEAM members, students, faculty, alumni, and friends join together to celebrate educators *making their mark* in this world!

CRRC also hosts a recruiting event, Taste of the TEAM, throughout the year, and, by a school request, for middle or high school students who may want to become a teacher. Students from partner districts travel to Louisiana Tech University in school buses. Students tour the CRRC, classrooms, library, and the lab school, where they meet faculty, current teacher preparation students, and clinical residents.

In the spring, with an invitation to family and friends, clinical residents are recognized for completing their program and honored with the distinction of a clinical fellow. The authors believe that its residents deserve this distinction after investing an entire year in a clinical experience. University and district leaders, faculty, and mentor-teachers also attend the event. As previously discussed, Louisiana began to pilot full-year residencies in fall 2014. Universities and school districts continue to work collaboratively to recruit future teachers and prepare them for the workforce.

Professional development, ongoing support, and financial honorariums are available to mentors who want to mentor residents through best practices in a co-teaching environment. Communication and meetings facilitated by technology, addressing the whole teacher, collaborating, co-teaching, and sharing resources and data all provide a rich foundation for the sustainability of the TEAM Model. These efforts are helping all to meet the common goal to provide a high-quality teacher workforce for students now and in the future.

BENEFITS TO ALL STAKEHOLDERS

While the transition from student teaching to the residency program has not been without its challenges, there have been several mutually beneficial success stories that are too noteworthy not to share. These include improved university/district partnerships, increased classroom instructional time, meeting district workforce needs, empowering mentors, and ensuring the success of teacher-candidates as they begin their teaching careers.

Improved University/District Partnerships

In more than fifty years of partnerships, communication and collaboration are stronger than ever. Districts routinely contact us to inquire about the new

pool of teachers, to collaborate on funding opportunities, and to discuss proposed or new state policies. The College of Education has increased district membership in its curriculum, policy, and assessment committees. Both the college and districts strive to share resources and professional development opportunities. University faculty attend district events and many of district partners serve as guest speakers or adjunct instructors. Great partnerships are one benefit for all stakeholders. Another is increased classroom instruction and practice for clinical residents.

Instructional Time

Teacher residency programs show great promise in improving preservice preparation and strengthening early-career mentoring. Residents experience the beginning of school, the beginning and end of multiple instructional units, and the impact their teaching strategies have on their students. Residents have the time to internalize what they are learning as well as what their students are learning through this extended time to practice. Extended instructional time also means more time for the clinical resident to better understand one's strengths, areas for development, and who they want to be as a teacher.

Beginning in July 2018, a teacher-candidate serving in a BESE-approved yearlong residency must hold a resident teacher certificate. Because residents hold a provisional certificate and are in most cases the appropriate substitute for the mentor-teacher, the state allows them to substitute for their mentor-teachers. Per Bulletin 996, "Holders of the resident teacher certificate may serve as a substitute teacher in their residency school system for up to ten days each semester" (Section 328, G; retrieved from Louisiana Department of Education, *Teacher Preparation Transition Guide*, 2017).

Mentors have commented on the ease of maintaining the scope and sequence of the curriculum with little to no need to reteach upon return to the classroom. School leaders love the built-in substitute teacher and wish there was a resident in every classroom at their school. Districts also have this extra time to evaluate and determine if they would like to hire the teacher resident.

Empowered Teachers

At the heart of the TEAM Model residency program is the mentor-teacher. From training to ancillary certificates, the mentor is a critical member of the TEAM. Their voices are critical to the success of the program as they commit to share every single aspect of their career with an apprentice, including their students and physical space. In the past five years, there has been a 97 percent

retention rate of mentor-teachers in the TEAM Model. Those rotating out of the mentor role were promoted to school leader positions. Alumni of the TEAM Model received high scores on their annual teaching evaluations, with several being hired at the same site where they completed their residency.

The retention rate of those completing the residency is slightly higher than those completing a traditional student teaching experience. School leaders have compared TEAM Model first-year teachers to those traditionally prepared teachers in their fifth year of teaching, noting that clinical residents' knowledge and skills meet or exceed those traditionally prepared. Along with better preparation of clinical residents, student academic success is also higher.

Student Success

Districts are comparing TEAM Model classrooms to traditional classrooms, and there are indications of significant student growth. In addition, individual testimonies speak very favorably to the strength of two sets of eyes in the classroom to determine needs that might have otherwise gone unnoticed. Several mentors have mentioned that classroom management has been better.

Residents are truly making their mark and having a sustained impact. They have had the opportunity to co-lead professional development, sponsor science fairs, serve on the staff of a state championship football team, and directly or indirectly impact student achievement. For example, in August 2018, a teacher resident, not the mentor-teacher, determined that a student could not read a pre-test. Residents get to know the strengths and weaknesses of their students and provide them with additional academic assistance. Students are more engaged and put more effort into their work. Student success demands the whole teacher teaching the whole student.

RECOMMENDATIONS

With an estimated 316,000 teachers needed each year by 2025, teachers are in continuous demand (Sutcher, Darling-Hammond, & Carver-Thomas, 2016). A key characteristic aligned to teacher retention is strong mentorship (Heider, 2005). TEAM Model leaders are pursuing new and innovative ways through clinical partnerships to share data with area school districts to validate the TEAM Model through clinical research. For any program exploring a shift to a full-year residency from a more traditional one-semester student teaching experience, there are several recommendations that deserve thoughtful consideration.

Carefully Select Partnerships

It is critical to purposefully select. Likewise, school districts should be fully informed of the residency program before committing to partner with a teacher preparation program. The liaisons representing each entity must have a strong professional relationship built upon trust to move the partnership forward and see growth in the program. The reputation of the TEAM schools begins with a solid support system from resident stipends to professional development and regular school leader walkthroughs. Clinical residencies cannot occur without great district partners and continuous communication.

Start Small

The TEAM Model began in one district with nine clinical residents and grew slowly into districts where program needs were being met for both stakeholders. Diversity of district school sites were considered establishing urban, suburban, and rural TEAM schools. However, placements at a distance of fifty or more miles were challenging for clinical residents who still had coursework during the day.

Highly effective mentor-teachers were sought and recommended by district liaisons, but only one elementary and one high school in three districts was selected so the CRRC could support the growth as well as the management of a few TEAM Model schools. Not only was it a challenge for clinical residents and the CRRC, but mentor-teachers were also committing to invest in a resident for a full year.

Mentor-Teachers and School Leaders

Slowly determining the best mentor for each resident is important. The mentor-teacher must be willing to share all aspects of planning, teaching, and assessment. Some teachers, even teachers of the year, have a hard time giving up control. The co-teaching practices used in the TEAM Model do not require solo teaching time, but even sharing 50/50 is difficult for some educators.

The mentor-teacher may not teach all day in the content area needed by the teacher resident. For some teachers, they teach outside their content area or do not teach all day if serving in a school leadership capacity. Those educators may not be the best fit for a resident who needs a full day of teaching in their pursued certification area. The mentor-teacher must be an effective communicator.

While mentors may have the highest gains in student achievement from the previous year, they may not be able to talk through planning, teaching, and assessment strategies until they understand how to communicate to a

different generation, that is, Generation X communicating with Generation Y or Z clinical residents. Initiating the TEAM Model is not only a challenge for the mentor-teacher, but it requires that school leaders buy in and support these practices.

Building and sustaining a team of mentors in one school requires strong school leadership. The school leader needs to have a clear understanding of the expectations of the TEAM Model for both mentor-teachers and teacher residents. When mentor-teachers started training, district and school leader(s) were also invited.

Mentor training is now facilitated through online courses and most, if not all, district and school leaders participated in initial training sessions. Upon reflection, those schools that exemplified the TEAM Model philosophy from the classroom to the administrative office, have all doubled in TEAM classrooms. Teacher preparation, mentor training, technology needs, etc., do come with a price.

Seek Financial Support During Transition

Many K–12 and higher education programs have seen budget cuts within the last five years. Additional funding will be critical as you start a full-year teaching residency. While the initiative discussed in this chapter was a state-initiated redesign, a proposal for funding still had to be submitted. As mentioned earlier, to sustain growth and build a strong foundation for a teacher residency, you will need financial support from your state, institution, or school districts.

If a traditional student teaching program covers one semester or fifteen weeks, a full-year residency might feel like two student teaching semesters. Transitioning from student teaching to clinical residency will require a complete transformation. You will need to reevaluate your assessment system, find additional financial support, and have stakeholder buy-in for this to work.

Adjust the Clinical Lens of Stakeholders

Superintendents, school leaders, mentors, residents, university clinical faculty, parents, and students must understand that a residency is not two student teaching experiences, but a longer timeframe for mastery of teaching knowledge and skills. The resident has more time to provide consistent evidence of planning, instruction, management, and professionalism from August to May. From the beginning, all stakeholders must understand the expectations of a full-year teaching residency.

In August, clinical residents attend the first in-service with their mentor-teacher. Then, they both have the opportunity to prepare the classroom for

their students prior to the first day of school. School leaders should introduce the teacher resident as a co-teacher to all school employees. Every school employee, as well as parents, must acknowledge the teacher resident as a resident in practice, and in the case of Louisiana, each teacher resident holds a resident teacher certificate.

The school should display the teacher resident's name on the classroom door next to their mentor-teacher's name, extend a personal workplace for them, provide necessary resources, and support their professional development. Residents have mentioned that this is a key benefit of becoming part of the school culture. It is also a key advantage for all stakeholders, including college faculty, when implementing and sustaining the TEAM Model.

Re-Conceptualize Faculty Participation

Whereas traditional student teaching programs have been led by clinical directors and facilitated by university supervisors, many of whom were retired educators, the TEAM approach to full-year residencies has increased participation of college faculty. Early Childhood and Elementary/Special Education college faculty teach some of their classes in partner schools prior to residency and evaluate them during their residency.

However, to save on the cost of travel, as well as limiting the time away from the college, technology was utilized to facilitate all stages of the evaluation, pre-, face-to-face, and post-evaluations. In addition, with clinical residents spending more time in school classrooms, technology also helps to connect with them on a regular basis. Faculty, teachers, and residents have been using Swivl and ZOOM to facilitate these connections. Seeking new and innovative ways to keep that connection will be important.

College of Education faculty also serve as guest speakers at professional development meetings, serve as academic advisors, conduct clinical evaluations through Swivl, volunteer to provide expertise for residents in need of growth in specific areas, etc. Keeping the university team abreast of residents' growth throughout the academic year could be compared to K-12 school-level data meetings. Reviewing clinical data by program will be essential to the success of the residents and, when shared with all stakeholders, vital to the continuation of the TEAM Model.

Gather Feedback from Stakeholders

Seeking regular feedback from college faculty, district leaders, school leaders, mentors, and residents have strengthened the TEAM Model. From surveys to interviews to face-to-face meetings, the powerful data used to inform

the development of the TEAM Model came directly from all participants over the past five years. Stakeholders outside of the college appreciate that their voices and suggestions are heard.

All stakeholders' feedback has inspired TEAM Model participants and improved teacher preparation programs, strengthened relations with district partners, and, hopefully, increased student achievement. None of this would be possible if change and flexibility were not embraced.

Maintain Flexibility

During a school year, circumstances and needs shift and change; flexibility is a requirement. For instance, mentor and teacher resident placements may change, district schools may rotate, district and college personnel may change, and budgets fluctuate from year to year if not during the academic year. The early years of piloting residencies were exciting and challenging. Having the flexibility to laugh in some situations and quickly problem-solve in others became essential skills for the clinical director.

Moving into an unknown realm of a full-year clinical experience was frustrating at times, but the voices from the classrooms encouraged the pursuit of a stronger preparation for future educators. Seek clinical and district leaders who are creative, flexible, and willing to try and try again when a new idea doesn't work. Initiating a full-year teacher residency will be the most frustrating and exciting time in that educator's career, but the determination to persevere will be the greatest reward as a new residency is established.

Share the Story

Don't be afraid to try new things, to ditch things that don't work, to learn from others, and to share the good along with the bad as you establish or change programs, procedures, and policies. Sharing the TEAM Model story has been a wonderful experience. So much has happened during these five years. Initially, stories were shared with prospective residents, college faculty, school district partners, and other institutions of higher education.

Then, with the establishment of a website, stories of success were shared, partnerships spotlighted, and news and other events posted. This website is still in use and has been a positive marketing tool for the entire university and community. Now, with this book chapter, the authors hope to reach many more educators who are interested in learning about the TEAM Model story.

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