

### Accreditation and the TPA

Topics of Concern Identified by RDI TPA Panel	Potential Issues Identified by RDI TPA Panel	Some Aspects of Relevant Standard (not comprehensive)	For consideration
<b>Accurate and Timely Information for Candidates about TPA</b>	<p>Are candidates getting necessary information about purpose, expectations, and requirements for the TPA?</p> <p>Are they getting information that can reduce condition codes and improve success rates?</p> <p>Are candidates understanding the kind of supports available to them?</p>	<p><b>Common Standard 2.</b> Talks about appropriate information and personnel are clearly identified and accessible. Not specific to TPA.</p> <p><b>Program Standard 5A (5) and 5B,</b> Candidate Preparation and Support.</p>	Are the standards explicit enough to require what the panel would like to see around the TPA?
<b>Embedding the TPA in program to avoid unnecessary duplication</b>	What constitutes embedding the TPA?	Neither the term embedding nor the concept of embedding are explicit in the standards. It is implied only that it is within the program. Because the concept of embeddedness is not included in the standards, accreditation is not considering this in any way currently.	Do the standards need to be made more explicit so that programs can implement a more consistent definition of embedding the TPA and then it can be checked on as part of accreditation?
<b>Faculty Support for all candidates</b>	How might candidates be better supported by their program?	<b>Common Standard 2:</b> Candidate Recruitment and Support. Includes performance	Are the standards explicit enough around the kind of support that programs

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		<p>expectations but does not specify performance assessments.</p> <p><b>Program Standard 5B.</b> Requires a number of supports.</p>	<p>must provide candidates around the TPA?</p> <p>Is there additional evidence that the Commission should be requiring to ensure that the programs are providing sufficient support?</p>
<b>Remedial Support for Struggling Candidates</b>	<p>Are struggling candidates getting the support they need?</p> <p>What happens if that support is needed after all other programmatic requirements are met? Because of the timing of these assessments, candidates must re-enroll in some way typically to get the support they need. Are there ways that the accreditation system can be improved to assist with this issue?</p>	<p><b>Common Standards 2:</b> Candidate Recruitment and Support. Not specific to the TPA, but implied inclusion.</p> <p><b>Program Standard 5(B)</b> requires “program provides appropriate remediation support and guidance on resubmitting task components consistent with model sponsor guidelines.” Is this language sufficient?</p>	<p>Are any adjustments to the standards needed to ensure struggling candidates get the support they need?</p> <p>What about candidates who have completed all other program requirements? Do the standards need to be changed to ensure that those candidates get continued support?</p>
<b>Mentor Training and Understanding of TPA</b>	The district mentor is critical to a candidate’s clinical practice experience. How can the	<b>Program Standard 3C: Clinical Practice</b> requires program	Should more specific language related to mentors and district

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	mentor provide greater support to the candidate and how can the program provide greater support to the mentor in their role?	<p>supervisors to be knowledgeable about TPA.</p> <p><b>Program Standard 3D: Clinical Practice</b> – requires 10 hours of initial orientation for district employed supervisors. Does not require TPA to be part of the initial orientation. TPA is not mentioned in the expectation that “district employed supervisor remain current in the Knowledge and Skills for candidate supervision and program expectations.”</p>	<p>administrators be included in Program Standard 5 or in the Clinical Practice Standard 3?</p> <p>How can we improve the support that interns get since they do not have mentors in the classroom with them since they are Teacher of Record?</p>
<b>Appropriate Clinical Practice Settings to Take TPA</b>	Can all candidates do the TPA in their CP settings?	<b>Program Standard 3: Clinical Practice.</b> Talks about clinical practice as preparing candidate for TPA, includes language ensuring that video is allowed.	<p>Are there any changes to the standards that are needed to clarify allowable settings?</p> <p>Should all settings really be allowed? Do the standards need to be more explicit about settings that are not allowable?</p>

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			<p>Do the standards need to be adjusted to reflect the conditions under which a setting would be appropriate?</p> <p>The issue here may not be the standard but may be other realities of clinical practice.</p>
<b>Formative Feedback by Program and District Employed Supervisor on the TPEs to improve TPA outcomes</b>	<p>Are candidates getting sufficient formative feedback on the TPA?</p> <p>Accreditation is focused on observation tools, number and structure of observations and feedback to candidates. Programs may use that type of evidence to show how they are providing formative feedback to their candidates, but the standards are not prescriptive as to what to submit to demonstrate and are focused more broadly on formative assessment, not specifically on the TPA as formative.</p>	<p><b>Standard 2: Toward Mastery of the TPEs, Standard 3 Clinical Practice, Standard 4: Supporting Candidates, Standard 5: TPA</b></p> <p>Formative feedback generally is mentioned in various places throughout the standards – such as standard 2: candidates working towards mastery of the TPEs.</p> <p>Accreditation focuses on formative feedback more broadly rather than specifically on that provided during the TPA process.</p>	<p>Do the standards need more specificity with respect to the use of TPA as a formative tool?</p>

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<b>Use of Data – Institutions with large number of Condition Codes</b>	<p>Should accreditation include a look at which institutions have high numbers of condition codes?</p> <p>What constitutes a high number?</p> <p>What would be the potential action that should happen? (Stipulations?)</p>	Not reflected in standards.	<p>Current system does not include consideration of condition codes.</p> <p>Standards would have to be adjusted/clarified to account for this expectation if it is to be done.</p>
<b>Use of Data – Institutions with Low Pass Rates</b>	<p>Should action be taken against institutions with low pass rates? (Stipulations, closure, action plan)</p> <p>If so, what would constitute “low”?</p> <p>What kind of action should be taken?</p>	<p>Program Standard 5 on TPA, requires program to maintain program level and candidate level TPA data, and to “document” the use of these data for reporting, accreditation and program improvement purposes.</p> <p>Language may be too vague or limiting. What kind of programmatic change is sufficient? What if the programmatic change doesn’t lead to improved outcomes?</p>	<p>Current system uses data on pass rates for accreditation teams to begin a deeper inquiry into what issue may be contributing to them (what part of the standards are not being met or well executed).</p> <p>Accreditation decisions are not currently made based on any one data point, including low TPA rates.</p>

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			<p>Current standards do not include a particular explicit threshold as to low pass rates and does not include explicit reference to consideration of low pass rates.</p> <p>Annual/Semi Annual Review of Pass Rates for Accreditation Purposes. Current accreditation system is focused on institutions going through site visits (year 5 -7) and not on a statewide look annually/periodically (PA team does this). If this is desired, it should be made an explicit expectation.</p> <p>What would such a system look like? What would constitute low pass rates? What would be the action then taken? (Stipulations, Required Action Plan, Technical Assistance,</p>

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			<p>Required Improvement Seen over Time?)</p> <p>If the above is expected, additional staffing, particularly in a data unit, would be necessary.</p>
<b>Use of Data – Institutions with Discrepancies in Outcomes</b>	Should variations in outcomes be considered in accreditation?	Not reflected I in standards.	Should the standards be explicit in looking at discrepancies? Those would need to be identified. What action would need to be taken by accreditation?
<b>Low pass rates for Intern programs specifically</b>	LPI – Intern programs typically among the lowest pass rates.	Except preconditions, intern programs are subject to the same preparation standards as all other like credential programs. However, some real differences – supervision, teacher of record, etc.	<p>If intern programs tend to be at the low end of pass rates (LPI assertion), are there policy and systemic changes needed?</p> <p>Is this a matter of technical assistance or more? Bring together a workgroup of intern programs?</p>

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			Are there changes to standards or structure of intern programs that are needed? Supervision? Support? Monitoring by Commission? District commitment?
<b>Use of Data – To Inform Induction – Individual Development Plan/Individual Induction Plan</b>	There should be a throughline between the preliminary program and the induction program. TPA outcomes should be part of this.	<p><b>MS/SS/SPED Standard 6:</b> Individual Development Plan. Request that candidate, program and district collaborate to develop an IDP consisting of recommendations for PD and growth in the candidates' induction program.</p> <p><b>Teacher Induction – Standard 3 – Individual Learning Plans</b> within the Mentoring System. This document drives the individualized induction experience. No explicit language that TPA results are part of either of these except with recent adoption of secondary passing standard (-1 SEM).</p>	<p>This is already in the standards. It has been a focus over the last 5 (or so) years in response to induction programs feedback that they were not receiving them.</p> <p>Standards could be reviewed to ensure that there is explicit inclusion of TPA results in these documents.</p> <p>Standards could be made more explicit about the role that the TPA results play in these processes.</p>



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<b>Use of Data – To inform Programmatic and Unit Level Changes</b>	<p>Are programs looking at their TPA data to make unit and programmatic level improvements?</p> <p>What level of program improvements are required under the standards?</p>	<p><b>Common Standard 4: Continuous Improvement.</b>  Implied inclusion of TPA results in these assessment systems but may want to be clearer.</p> <p>Program Standard 5A requires the program to maintain data, including individual and aggregated TPA results over time, and use the data for program improvement.</p>	<p>Continuous improvement systems have been a focus of accreditation for a very long time. Although the Common Standards do not explicitly call out TPA data, it is included in Program Standard 5. The Common Standard might be more explicit about how and what kind of TPA data should be included in every institution's/program's continuous improvement system. The program standard may need some clarity about when and what kind of program improvement is needed.</p>