



**Guidance on Clinical Practice and Supervision  
of Preliminary PK-3 Early Childhood Education (ECE)  
Specialist Instruction Credential  
Teaching Candidates**

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## Introduction

The Commission approved the PK-3 Early Childhood Education (ECE) Specialist Instruction Credential to meet the growing need of preparing educators to provide quality public school instruction and learning environments for California’s children in preschool through grade 3. The Commission-adopted standards for Preliminary PK-3 ECE Specialist Instruction Credential teacher preparation programs include expectations for programs to provide candidates with appropriate supervised clinical practice. In adopting the program standards related to supervised clinical practice, the Commission supported the critical role that high-quality and extensive clinical practice experience plays in preparing effective educators. The standards related to clinical practice are at times specific and directive, while also allowing for flexibility for institutions to design experiences that work well for their candidates and the PK-3 school settings they serve. This guidance document clarifies certain aspects of the standards pertaining to clinical practice for all programs that offer PK-3 ECE Specialist Instruction preparation. It is intended to assist programs in structuring a high-quality clinical practice experience but does not substitute for, or supersede, the program standards themselves. *Programs must be aligned to the entirety of the PK-3 ECE Specialist Instruction Credential standards and not simply those topics discussed in this document.*

*An important note in understanding the program standards:* In many places, the program standards reference “all” children. Because the credential authorizes service in public schools and early childhood learning spaces with children in grades PK-3 in California, it is critical that candidates are prepared to meet the needs of the full range of learners. The following information is provided in the Teaching Performance Expectations (TPEs) and should guide the understanding of the program standards:

*“Throughout this set of TPEs, reference is made to “all” children. This phrase is intended as a widely inclusive term that references all children within a given PK-3 ECE setting. Children may exhibit a wide range of learning and behavioral characteristics and assets as well as disabilities, dyslexia, intellectual or academic advancement, and differences based on ethnicity, race, socioeconomic status, gender, gender identity, sexual identification/orientation, language, religion, and/or geographic origin. The range of children in California early learning settings also includes students whose first language is English as well as multilingual learners. This inclusive definition of “children” applies whenever and wherever the phrase “all children” is used in these standards and PK-3 ECE TPEs.”*

Throughout this guide, you will find references to specific elements of the preconditions, program standards, and TPEs for the PK-3 ECE Specialist Instruction Credential. Access to the full text of all program standards and other details can be found at the following link: [PK 3 ECE Specialist Instruction Handbook](#).

## General Guidance

### Goals of Clinical Practice and Supervision

The opportunity to practice and refine teaching strategies and skills is central to all teacher preparation programs. All programs, regardless of pathway, are required to provide high quality clinical practice experiences for candidates throughout their educator preparation programs. Clinical practice is designed in such a way that candidates learn from, and are supported and guided by, experienced educators from both their program and in their placements. Through clinical practice, candidates are provided with opportunities to apply the knowledge and skills learned in their program that are embodied in the TPEs. An end goal of clinical practice is that candidates are well prepared for the role of new teacher as well as successfully complete a Teaching Performance Assessment (TPA) to demonstrate they have achieved the TPEs and ensure they are prepared to enter the profession.

### Responsibilities of the Institution to Meet Standards

In considering clinical practice experiences for candidates, all Commission-accredited institutions and approved programs must adhere to both [Common Standard 3: Course of Study, Fieldwork and Clinical Practice](#) as well as any relevant credential specific program standards. This guide focuses on the PK-3 ECE Specialist Instruction Credential; however, explicit language about clinical practice is also included in Program Standard 4: Equity, Inclusion, and Diversity, Standard 7: Effective Literacy Instruction in PK-3 Settings, and Standard 8: Effective Mathematics Instruction in PK-3 Settings. Therefore, additional information on these standards is also included in this guide.

It is the responsibility of each approved program to ensure the following:

- (1) that all candidates complete the required clinical practice requirements as detailed in the program standards, and
- (2) that all candidates receive proper supervision and guidance from both the program and district/local education agency (LEA)-employed supervisors throughout their clinical practice experience.

The expectation is that all programs will meet the specific clinical practice and supervision requirements as detailed in the [Common Standards](#) and [program standards](#). The Commission-adopted standards provide institutions flexibility in how they design and implement their program to best meet their local context, and this is true as well for the clinical practice standards. However, programs should note that there are specific clinical practice requirements embodied in the program standards that all programs must meet.

During Initial Program Review (IPR), reviewers will determine whether the institution's proposed program is in alignment with the standards. Only prospective programs that have been found to be aligned may move forward for approval by the Committee on Accreditation (COA). During Program Review, Common Standards Review, and the subsequent Accreditation Site Visit, the Board of Institutional Review (BIR) will review curriculum and fieldwork

requirements, program records, policy documents, available data, and conduct interviews in order to verify that the standards are being fully met. Given all of the information reviewed, the accreditation team will make a determination as to whether or not the standards are met.

### Record Keeping

Institutions are required to maintain records verifying candidate clinical experiences. Each institution will decide the most appropriate way to keep track of the documentation to demonstrate that the program is meeting the clinical practice and supervision requirements. It is important to ensure that the record keeping includes all relevant requirements for the clinical practice experience for each candidate such as number and level of placements, information about the district employed supervisor, and other specific requirements. While the Commission does not anticipate collecting and examining individual records beyond the level of detail required during Program Review, these records may be requested during a site visit to ensure that institutional processes are in place and that required clinical practice and supervision is taking place for each candidate. Further, an understanding of the process and documentation that the program uses to ensure that all requirements are being met for every candidate is an important part of the accreditation process.

## **Clinical Practice Experiences for the PK-3 ECE Specialist Instruction Credential**

### Progression of Clinical Practice Experience

Program Standard 3 Language: [“Clinical Practice is a developmental and sequential set of activities...”](#)

It is the expectation of the Commission that fieldwork experiences evolve over the course of the program, increasing in responsibility as the candidate moves closer to completion of the preparation program and licensure. Clinical experience can encompass a wide variety of activities that range from early fieldwork that includes planned and intentional (supervised) observation of veteran teachers modeling promising practice in lesson design and instruction, to beginning supervised practice using various teaching strategies in diverse settings, to assuming full responsibility for students in the classroom, and demonstrating pedagogical competence. At its most advanced, the clinical practice experience includes at least four weeks of solo or co-teaching or its equivalent (often referred to as the culminating clinical practice experience) allowing the candidate to experience fully the responsibilities of a classroom teacher and for the candidate to have opportunities to demonstrate they are ready to assume this role.

### Minimum Requirements for Clinical Practice for the PK-3 ECE Specialist Instruction Credential

Program Standard 3 language: [“Clinical Practice...must consist of a minimum of 600 hours of clinical practice...”](#) and [“Clinical practice experiences must include two different grade levels within the PK-3 grade range including at least 200 hours in a preschool \(PK\) and/or transitional Kindergarten \(TK\) setting and a minimum of 200 hours in a Kindergarten through third grade \(K-3\) setting.”](#)

Supervised clinical practice provides all candidates, regardless of pathway, with the opportunity to practice the knowledge and skills required by the credential and included in the PK-3 ECE TPEs. There are two primary requirements for clinical practice for the PK-3 ECE Specialist Instruction Credential for all candidates, regardless of pathway:

1. A minimum of 600 hours of clinical practice throughout the course of the preparation program.
2. Clinical practice experiences must include two different grade levels within the PK-3 grade range:
  - a. at least 200 hours in a preschool (PK) and/or transitional Kindergarten (TK) setting serving children ages 3-5 and
  - b. at least 200 hours in a Kindergarten through third grade (K-3) setting.
  - c. at least 200 hours in serving either age group in a or b above.

These requirements are applicable to all PK-3 ECE Specialist Instruction credential candidates regardless of the type of program pathway. This means that even intern and residency programs must find ways for their candidates to meet the requirements in 1 and 2 above. If structured carefully, candidates may be able to complete all of their clinical practice during regular school hours. Accomplishing this requires intentional and sometimes creative placements, scheduling, and close coordination with placement sites. Although interns serve as teachers of record, they must be provided guidance and support for the duration of their service on an intern document and as required in the preconditions and the standards.

Additionally, as is indicated in the record keeping section above, programs must keep thorough documentation that each candidate has satisfied the clinical practice requirements (a minimum of 600 hours with the minimum of 200 hours in PK and/or TK and minimum of 200 hours in K-grade 3, and how they fulfilled the remaining 200 hours) outlined in the standards.

#### Appropriate Placements for PK-3 ECE Specialist Instruction Credential Candidates

The PK-3 ECE Specialist Instruction Credential standards have several requirements that define appropriate placements for a PK-3 ECE Specialist Instruction Credential candidate. To determine the appropriateness of the placements, programs must consider the:

- 1) age and grade level,
- 2) curriculum being taught, and
- 3) supervision requirements

#### *PK-3 Curriculum*

Program Standard 3 language: [“Candidates are provided with opportunities to gain knowledge of important concepts in early learning appropriate to the developmental range of young children PK-grade 3.”](#)

Placements must be selected to provide the candidate with experiences that allow them to practice and acquire the knowledge and skills included in the PK-3 ECE TPEs and rooted in California’s adopted [Preschool Learning Foundations](#), [Preschool Curriculum Framework](#), [K-3 Student Content Standards](#), and [Frameworks](#) appropriate to the age/grade levels of the

children. Placements that do not rely upon these foundational state approved/adopted documents are not appropriate settings for clinical practice. Clinical practice settings need to ensure that candidates are able to practice and become proficient in their pedagogical skills related to California's adopted curriculum for this age and grade span. Placements should also provide candidates with opportunities to choose, administer, analyze, and apply results of a range of early childhood assessments of learning as well as of social-emotional growth and development and allow for the candidate to demonstrate the full range of TPEs.

### *Age and Grade Level*

Pre-K and TK settings are those generally serving children ages 3-4 years old. These include California State Preschool, Head Start programs, independent center-based preschools, and Transitional Kindergarten classrooms in public school settings. Some of these experiences may take place in the candidate's California early childhood education employment setting including California State Preschool or Head Start TK-3 public school settings, as well as within independent/private early childhood center-based settings aligned with the adopted [Preschool Learning Foundations](#), [Preschool Curriculum Framework](#), [K-3 Student Content Standards](#), and [Frameworks](#) provided the candidate meets the 600 hours of clinical practice as described above (with at least 200 hours completed in a PK or TK setting serving 3-4 year olds, and at least 200 hours completed in a K-3 setting, provided these settings meet all other criteria required in the program standards).

### *Please Note:*

During the first year or so of implementation of PK-3 ECE Specialist Instruction Credential programs, candidates will need to be in settings that allow them to take the Multiple Subject teaching performance assessment which is designed and calibrated for students in TK-3, not PK. Programs will need to be intentional about the sequence for the candidates' placements. Candidates completing 200 hours in a PK setting will not be able to take the TPA in that setting. Therefore, it is advisable to have the candidate complete the PK hours first so that they can then be sufficiently prepared to do their TPA in their second placement in a TK-3 setting.

### *Settings*

Clinical practice sites should be selected that demonstrate commitment to developmentally, culturally, and linguistically appropriate practices, as well as to collaborative relationships with families/guardians. In addition, clinical practice sites should demonstrate evidence-based practices and continuous program improvement, have partnerships with other appropriate educational, social, and community entities that support teaching and learning, place students with disabilities in the Least Restrictive Environment (LRE), provide robust programs and support for English learners, reflect to the extent possible socioeconomic and cultural diversity, and permit video capture for candidate reflection and TPA completion. Clinical practice sites should also have a fully qualified site administrator and offer curriculum aligned with the adopted [Preschool Learning Foundations](#), [Preschool Curriculum Framework](#), [K-3 Student Content Standards](#), and [Frameworks](#). Private settings are eligible as clinical practice sites as long as the site meets all criteria as outlined in the standard.

### *Supervision*

Clinical experiences must be under the guidance and supervision of a qualified district/LEA-employed supervisor, mentor teacher, or veteran practitioner in addition to a program supervisor and/or course instructor. This guidance and supervision may occur in person or via technology-assisted communication.

More information on supervision is discussed later in this document.

### *Eligible Clinical Practice Activities*

Only lessons and learning activities that are intentionally designed by the program, occur in placements that are selected or approved by the program, and are for the purpose of helping candidates understand the link between specific objectives in coursework and teaching practice may qualify as part of the 600 hours of clinical practice requirement. The primary purpose of the clinical practice experience requirement is to provide candidates the opportunity to practice and reflect on the various teaching strategies and approaches that they are learning in coursework under the careful guidance and support of veteran practitioners at both their school site and from their program. In order to guide candidates in developing the competencies they need to serve their students; clinical practice is instruction that is:

- A. prepared with and guided by one or more designated supervisors selected and approved by the program for the purpose of supervision (co-teacher, mentor, university supervisor, faculty, etc.)
- B. followed by designated time for reflection.

(If a candidate completes some of their instruction in a classroom where the district/LEA-employed supervisor/mentor teacher is not present, that instruction may qualify toward the 600-hour requirement, as long as it incorporates the elements above.)

Activities are considered eligible to be included in the 600 clinical practice hours when the candidate is involved in intentional planning, facilitating, teaching, assessment, and reflection.

Examples of appropriate clinical practice activities include, but are not limited to:

- Guided and supervised teaching including whole class and small group instruction; planned, intentional engagement with children; facilitation and assessment of play and other learning experiences; solo teaching, other direct contact with children that includes planning and reflection; and co-planning time with veteran practitioners for lessons and/or activities that the candidate will deliver/facilitate.
- Working with veteran practitioners in assessing and analyzing student work, reflecting on lessons, and planning for the needs of individual children.
- Time working with professional learning communities, grade level and department meetings, student success team/IEP meetings.
- Time working with families and caregivers, along with veteran practitioners, to strengthen candidates' understandings of their students' community and culture and to help engage families and caregivers in supporting their children and their learning.



Among activities that should **not** be included in the 600 hours are general lesson planning done independently by the candidate or hours spent supervising extracurricular activities that do not involve candidates' intentional planning and reflection. In addition, mock instruction, or observation of fellow candidates (and without PK-3 students present) as part of a course would **not** qualify as part of the required 600 hours.

### **Support and Supervision**

Candidates have assigned program supervisors as well as district/LEA-employed supervisors to help guide them in refining their teaching practices toward mastery of the TPEs. This structure may look a little different depending on whether the candidate is a student teacher (traditional or residency) or an intern. Nevertheless, these supervisors play critical roles in ensuring that candidates are guided and well supported in their development as teachers.

#### Program Supervisor Observation Requirements

Program Standard 3 language: ["The minimal amount of program supervision involving formal evaluation of each candidate must be 4 times per quarter or 6 times per semester."](#)

1. Program Supervisors must hold a valid California teaching credential (with significant experience in early childhood education), hold a Master Teacher or higher-level Child Development Permit as appropriate to the field placement of the candidate being supervised, or have equivalent expertise such as an advanced degree or other evidence of professional competence and expertise in the field of early childhood education. They should have recent professional experiences in ECE settings where the curriculum aligns with *California's Preschool Learning Foundations* and *Curriculum Frameworks*.
2. All candidates, including interns, are required to be properly supervised until they have completed all credential requirements and hold a preliminary teaching credential. The goal of this requirement is to ensure that all candidates, regardless of pathway, are provided with adequate supervision and evaluation from their program supervisor throughout their clinical practice experience. Observations with formal evaluation must continue each quarter or semester that the candidate is enrolled in their preparation program and in a setting where the candidate is actively engaged with children in the learning space.
3. The formal observation/evaluation requirement of four times per quarter or six times per semester can be interpreted to be approximately once every 2-3 weeks.

If a program elects to supervise candidates using a different model of frequency of observations and can justify that it better meets the needs of the candidate, it may be acceptable. However, it is the responsibility of the program to demonstrate that, over the course of the program, at least the equivalent amount of supervision is achieved. The accreditation site visit team will make a determination as to whether or not this part of the standard is being met. For example, a 2-year program may decide to complete eight program supervisor observations per semester in the first year and four in the second, which would lead to an average of six times per semester. This may meet the goal and

intent of the standard if the program can provide a valid justification for this practice and can provide outcomes data that demonstrates that their candidates are successful with this program design.

#### District-employed Supervisor Support Requirements

Program Standard 3 language: [“The minimum amount of district-employed supervisors’ support and guidance must be 5 hours per week.”](#)

1. The five hours per week of district/LEA-employed supervisor support and guidance time is only required during the period that the candidate is assigned a specific mentor teacher. They are not required during early field experiences during which the candidate does not have an assigned district/LEA-employed supervisor/mentor teacher.
2. Support and guidance may include a variety of activities, including lesson-modeling, guided play, observation and coaching, co-planning and feedback on lesson planning, problem-solving regarding instruction, classroom management, student access to curriculum, and other student-related issues, grade-level meetings, and email and phone conversations with a district-employed supervisor.
3. The goal of this part of the standard is to ensure that all candidates, regardless of pathway, are properly supported and supervised during their clinical practice. The expectation is that every program will satisfy this requirement as written. However, if a program elects to satisfy the goal of this standard in a way that they believe better meets the needs of their candidates, it is the onus of the program to demonstrate that the goal is still met.

For example, if a district-employed supervisor were to provide 10 hours of support per week during the first weeks of placement and 2 hours of support per week in the final weeks of placement, the average for the term could be greater than 5 hours per week. This may satisfy the goal of the standard were the program to provide a valid justification for this practice.

4. For intern candidates, support and supervision (144 hours of general support and 45 hours of English learner support annually) is a shared responsibility between the program and the employer. Hours spent with a district/LEA-employed supervisor to satisfy the intern annual hour requirements may qualify towards meeting this five hours/week requirement. Support and supervision must continue as long as that candidate is serving on an intern document even if they have completed all program requirements and are completing examination requirements.

### Capturing Evidence of Observations

Program Standard 3 language: [“Clinical supervision may include an in-person site visit, video capture or synchronous video observation, but it must be archived either by annotated video or scripted observations and evaluated based on the TPEs...”](#)

1. The standard requires that there be a means by which the program documents clinical supervision, either in person (e.g., supervision notes), through synchronous video, or video capture. The instruction is assessed against the adopted TPEs and generates data. The data is used to assist the individual candidate and is examined across the program to understand where program improvements are needed.
2. The video evidence of the observation does not need to be archived for any length of time beyond that which is needed for the supervisor to observe and evaluate the teaching performance. However, evidence of the annotations and feedback from the observation should be archived for at least 2-3 years in order to make this evidence available during the accreditation cycle.

### Requirements Pertaining to the Qualification of the Site Administrator

Program Standard 3 language: [“Clinical sites should also have a fully qualified site administrator.”](#)

1. A qualified administrator at a TK-12 school holds a preliminary or clear Administrative Services Credential, while a qualified administrator at a preschool must hold a Child Development Program Director Permit or Site Supervisor Permit. A fully qualified child care center director under the supervision of [Community Care Licensing Division \(CCLD\), Title 22](#) licensing requirements will be assumed to have met this requirement. If the designated administrator at a particular school placement does not possess any of the above, then the program must provide justification as to how the administrator is nevertheless qualified. If the program is not able to provide this justification, then it is not appropriate to place candidates at that site.

### **Solo or Co-Teaching Requirement**

Program Standard 3 Language: [“Student teaching includes a minimum of four weeks of solo or co-teaching or the equivalent.”](#)

This element of clinical practice ensures that candidates have experiences similar to those that they will experience as a credentialed teacher in their own classroom with full responsibilities for the students. Typically, these four weeks come at or towards the end of their clinical experience when they are prepared for the challenges of this solo or co-teaching requirement.

1. “Solo or co-teaching or the equivalent” includes those activities in which the candidate plans or co-plans the lessons, delivers the lessons/facilitates play, and assesses a child’s growth and learning. During this period, the candidate is expected to fully participate within the school environment and experience and understand the full range of activities and responsibilities of being a teacher of record. The solo or co-teaching experience must

provide the candidate with an authentic teaching experience and the opportunity to demonstrate pedagogical competence.

2. The minimum time requirement (4 weeks) for the solo or co-teaching period is to ensure that the candidate experiences the full range of instruction rather than sporadic lesson delivery. During this time the candidate should be fully responsible for: ensuring lessons and other learning activities are planned, resourced, and facilitated based on the students in their classroom, monitoring student progress toward achieving the academic goals included in the plans, informal and formal assessment of students, and reflection of their teaching practice. In co-teaching situations, the candidate should take the lead and be accountable for all elements of the learning activities.

As long as this full range of planning, instruction, and reflection is occurring, the program may design a candidate's solo or co-teaching experience to be either contiguous or divided into one or two-week segments, as appropriate. In the case where the four weeks are not contiguous, the program must demonstrate how the design of this solo teaching experience or the equivalent addresses all of the requirements and objectives discussed in this section.

3. The solo or co-teaching experience may occur at any time during the clinical practice placement during which the candidate is prepared to take on the responsibility. This element of clinical practice is often completed during the final portion of the term; however, the program and the triad (candidate, university- and site-based supervisors) may find another time to be more appropriate.
4. Because portions of the Teaching Performance Assessment (TPA) may be completed during the solo or co-teaching student teaching experience, the program should design solo or co-teaching experiences with that goal in mind. Until the PK-3 ECE TPA is available, programs must ensure candidates are able to complete a Commission-approved Multiple Subject TPA with students in grades TK-3. Please refer to the subsequent section for more information regarding the TPA.

### **Clinical Practice Placements and the Teaching Performance Assessment**

Candidates must be able to complete the Teaching Performance Assessment (TPA) during their clinical practice experiences. Currently, there is no Commission adopted TPA specifically designed for the PK-3 ECE Specialist Instruction Credential; however, one is currently under development by the Commission.

- a. Until a PK-3 ECE Specialist Instruction Credential specific TPA is designed and adopted by the Commission, candidates will need to successfully complete one of the three Commission-approved TPAs for the Multiple Subject credential (CalTPA, edTPA, or FAST), meaning they will need to be placed in grades TK-3 during the time they are working on the assessment.
- b. Until such time that there is a Commission-adopted PK-3 ECE TPA, candidates may not attempt to complete the TPA in a preschool setting.

- c. These conditions will require that programs are intentional about the sequence for the candidates' placements. If a candidate is completing 200 hours in a PK setting rather than a TK setting, they will not be able to take the TPA in that PK setting. Therefore, it is advisable to have the candidate complete these hours first so that they can then be sufficiently prepared to do their TPA in their second placement in a TK-3 setting.
- d. Programs must ensure that candidates are placed in an appropriate setting that allows for video capture of students and/or support personnel for completing the TPA.

TPA Format and Cycle	Appropriate Placement	Notes
Multiple Subjects – Cycle 1	TK-3	Use until PK-3 ECE TPA becomes available.
Multiple Subjects – Cycle 2	TK-3	Use until PK-3 ECE TPA becomes available.

The table above will be updated upon Commission action to adopt a PK-3 ECE TPA.

### Intern-Specific Requirements

Interns are teacher of record as they work to complete their preparation program and credential requirements. As such there are additional requirements that are specific to intern programs and interns.

1. The California Education Code does not authorize placement of interns at private schools. Candidates may not complete an internship at a private school under any circumstances.
2. Clinical practice for the PK-3 ECE Specialist Instruction Credential requires that all candidates complete a minimum of 200 hours each in both a PK or TK setting and a K-3 setting, with the remaining 200 hours in either setting. **Interns (and residents) are not exempt from this requirement.** It will be important for employers of interns and program sponsors to work together to determine how each intern candidate will be able to obtain the additional required clinical practice hours. Programs should explore a variety of creative solutions that will allow the candidate to earn the required experience. For instance, if two PK-3 ECE Specialist Instruction Credential interns are hired at a single school, one could be placed in PK-TK classroom and the other in a K-3 classroom then exchanging their assignments at particular points in the school year to allow both to earn the required 200 hours in the other setting. *It will be important for the district and the program to include provisions for these interns to obtain the additional 200-400 hours in the memorandum of understanding and for all parties, including the intern, to be clear on how this will happen before the placement is made.*

Online schools, independent study programs, and home schools are not prohibited as placements for interns, however, the required experience may be difficult and, in some cases, impossible to achieve. Programs must consider if the employment setting is

appropriate for learning to teach and if the program will be able to ensure that the intern is able to get the significant experiences required to demonstrate understanding and effective application of all the TPEs and to complete their TPA. This includes the ability to teach whole groups of students. The Commission understands that during times of teacher shortage, there may be pressure on programs regarding intern placements. However, decisions regarding fieldwork placements, including placements as teacher of record, are the responsibility of the program, not the candidate nor the employer. The program has a responsibility to ensure that all candidates seeking the PK-3 ECE Specialist Instruction Credential will be prepared to serve in all settings that are authorized by that license, and as such, future career goals (for instance, they express that they only want to seek a career where they are teaching in a home school setting or an independent study program) are not taken into consideration.

### Supervision and Support Requirements Specific to Intern Candidates

1. [Preconditions for PK-3 ECE Specialist Instruction Credential](#) adopted by the Commission require that intern candidates receive a minimum of 144 hours per year of general support and 45 hours per year of English learner support. These hours may be supervised by the program and/or the district-employed supervisor.
2. As with all candidates, the program supervisor for intern candidates must also provide a minimum of four observations per quarter or six per semester formal evaluation. These observations must continue each quarter or semester that the candidate is enrolled in their preparation program.
3. As with all candidates, hours of instruction by a candidate in a classroom where the district/LEA-employed supervisor/mentor teacher is not present can qualify toward the 600 hours as long as these hours of instruction are prepared with and guided by one or more designated supervisors selected and approved by the program for the purpose of supervision (Co-teacher, mentor, university supervisor, faculty, etc.) and are followed by designated time for reflection.

### **Professional Preparation Equivalency for Clinical Practice**

The Commission recognizes that many candidates for this credential may already be experienced early childhood educators and/or have completed structured Early Childhood Education practicum(s). Through the requirements in the standards and the proposed regulations, the Commission intended to ensure that candidates who meet specific criteria are granted equivalency for their experience toward meeting their clinical practice requirement. Therefore, Commission approved professional preparation programs for the PK-3 ECE Specialist Instruction Credential **must** recognize and grant equivalency for prior experience, as follows, and must develop a clearly articulated process for granting such equivalency. Guidance on the evidence required by programs to demonstrate adherence to recognizing candidates' appropriate prior experience for the purposes of clinical practice equivalency can be found under Precondition 7 in the [PK-3 Program-Specific Preconditions Evidence Guide](#).

### Equivalency Option 1 – Professional Work Experience

PK-3 ECE Specialist Instruction Credential candidates who meet *both* the requirements outlined in subsections (A) and (B) below shall be granted equivalence for at least 200 hours of the required clinical practice experience in a PK or TK setting within the program of professional preparation. They may be granted equivalence for an additional 200 total hours of the required clinical practice experience in a PK or TK setting within the program of professional preparation. Such candidates must meet all other program requirements, including at least 200 hours in a K-3 setting. Candidates who are eligible for this clinical practice equivalence must meet both of the following criteria:

- A) Hold a valid Child Development Permit at the Teacher level or higher or verify employment as a lead teacher in a Head Start program or a childcare and development center serving preschool-aged children, and
- B) Verify six (6) years or more of satisfactory, full-time teaching experience as a lead teacher in a public or private center-based childcare and development program serving preschool-aged children that is either a license-exempt childcare and development center pursuant to [California Health and Safety Code section 1596.792\(o\)](#) or holds a license as defined in [section 101152\(l\)\(1\), Article 1, Chapter 1, Division 12, of Title 22](#). (Programs and candidates can confirm whether or not a center is so-licensed by visiting the Community Care Licensing website: <https://www.cdss.ca.gov/inforesources/community-care-licensing>)

*What does Teacher Level or Higher Mean?* The Child Development Permit structure contains 6 levels. To meet requirement (A) above, one must possess either a valid Teacher, Master Teacher, Site Supervisor, or Program Director level permit. Candidates holding the Assistant and Associate level permits do not qualify for the clinical practice equivalency under this part of the standard.

*What does full time teaching experience mean?* For the purposes of this provision of the PK-3 ECE Specialist Instruction Credential, full-time experience is defined as classroom-based teaching for at least **three** hours per day, for at least 75% of the school year. *Part time experience, or experience serving as anything other than a lead teacher, shall not be acceptable.*

*What does the Commission mean by Lead Teacher?* Lead teacher means an adult who has direct responsibility for the care and development of children from birth to 5 years of age in a center-based early childhood care setting and serves in a teaching capacity with 3- and/or 4-year-olds.

*Confirming a setting that meets (B) above:* The program will have responsibility to ensure that the setting where the candidate has experience meets the requirements in (B) above. Documentation and record keeping on each candidate is critical. The setting may be in a public or private center-based childcare and development program serving preschool

children ages 3-4. These may be the California State Preschool program, Head Start programs, a license-exempt childcare and development center pursuant to [California Health and Safety Code section 1596.792\(o\)](#) or holds a license as defined in [section 101152\(l\)\(1\), Article 1, Chapter 1, Division 12, of Title 22](#). Programs and candidates can confirm whether or not a center is so-licensed by visiting the Community Care Licensing website: <https://www.cdss.ca.gov/inforesources/community-care-licensing>. It is necessary to verify that the experience was with children ages 3-5 since many of these settings also serve younger children.

*Satisfactory Teaching Experience:* Satisfactory teaching experience addresses the scope of the teaching experience that the candidate had to qualify for this clinical practice equivalency. Satisfactory teaching experience shall be verified by the public or private center-based childcare and development center. Verification shall include a statement from the employer confirming that the teacher's performance was rated satisfactory or better in the following areas (must include all):

- i. The use of developmentally appropriate teaching strategies for preschool-aged children.
- ii. The ability to establish and maintain developmentally appropriate standards and expectations for student behavior.
- iii. A demonstration of deep knowledge of the early literacy, early mathematics, and other preschool subjects, and the use of developmentally appropriate teaching and learning approaches that engage students and promote student understanding.
- iv. An ability to plan and implement a sequence of appropriate learning activities, both teacher and child initiated. An ability to evaluate and assess student learning outcomes.
- v. An ability to communicate effectively with young children and their families/guardians.

*Determining whether to grant between 200-400 clinical practice hours for candidates who meet this requirement.*

All candidates that meet the requirements for clinical practice Equivalency Option 1 *must* be granted 200 hours of clinical practice experience for their work in PK. However, the regulations allow institutions authority to grant *up to* 400 hours for candidates who meet the criteria listed above. Granting up to an additional 200 hours credit for clinical practice to candidates who have met the above criteria through professional equivalency is up to the discretion of the program. Programs must establish and clearly articulate to candidates how these additional (up to 200) hours are credited for candidates who meet the equivalency criteria.



### Equivalency Option 2 – Completion of Practicum(s) in Early Childhood Education

Candidates for the PK-3 ECE Specialist Instruction Credential who have completed a practicum course at a regionally accredited institution of higher education, including a community college, shall be granted clinical practice equivalency for these hours commensurate with the number of hours served in the practicum course, up to a maximum of 200 hours, provided that **all** of the following conditions are met:

- A) The practicum course is credit bearing and degree applicable towards a Teacher level or higher-level Child Development Permit or a degree in Early Childhood Education, Child Development, Child and Adolescent Development, Early Childhood Studies, or Human Development.
- B) The practicum hours completed were in a preschool or early childhood setting serving 3–4-year-old children and included clinical practice experience that was supervised at minimum by a trained faculty member/instructor who provided observation and feedback to the candidate.
- C) The candidate earned a C or better on the practicum course. Courses earned with a “Pass” or another designation deemed by the institution of higher education to be equivalent to a grade of “C” or higher are also acceptable.
- D) The candidate provides to the Commission-approved PK-3 ECE Specialist Instruction program verification of the hours served through transcripts and other documentation as determined by the Commission-approved program.

### Receiving Equivalency for both Options 1 and 2

Candidates who have completed **both** a verified work experience as outlined in Equivalency Option 1 **and** a qualified practicum experience as outlined in Equivalency Option 2 may be granted a maximum of 400 hours total toward the clinical practice requirement and shall complete the remaining 200 hours of clinical practice in grades K-3 during the teacher preparation program. Candidates may not receive more than 400 hours of clinical practice equivalency under any circumstances. *It is important that both programs and candidates understand that the clinical practice requirement of 600 hours and the TPA requirement are two separate requirements for the credential. This means that for those candidates that were granted the full 400 hours of clinical practice equivalency for completing both option 1 and 2 above, and therefore only need 200 hours to complete the clinical practice hour requirement, may still need to do more than the remaining 200 clinical practice hours in order to complete the TPA. Completion of the clinical practice hours does not negate the need to be in a placement in order to complete the TPA requirement.*

### **Other PK-3 ECE Specialist Instruction Clinical Practice Standards Where Clinical Practice is Explicitly Noted**

Clinical practice provides opportunities for the candidate to practice effective teaching strategies. It is expected that clinical practice will encompass opportunities for the candidate to practice and work toward mastery of all TPEs. Although Program Standard 3 is focused entirely on clinical practice, all nine PK-3 ECE Specialist Instruction program standards embody clinical

practice components. Below is information from three other PK-3 ECE program standards where there are explicit expectations for inclusion in clinical practice.

Program Standard 4: Equity, Inclusion and Diversity

Program Standard 4 language: [“The program provides each candidate with an opportunity to learn and apply theories and principles of educational equity for purposes of creating and supporting socially just learning environments.”](#)

1. Clinical practice placements must provide candidates with opportunities to work in school settings that demonstrate commitment to developmentally, culturally, and linguistically appropriate and sustaining practices as well as to collaborative relationships with families/guardians and reflect the full diversity of California public schools.
2. The Commission strongly encourages programs to place candidates in PK-3 school settings that provide diverse representation relative to the following:
  - a. race, ethnicity, country of origin of the students;
  - b. number of students from families below the federal poverty level, number, or percentage of students on scholarship, tuition assistance, or other proxy that demonstrates that the school serves students from families in lower socio-economic income ranges;
  - c. languages spoken by the students, including mono- and multi-lingual learners;
  - d. the inclusiveness of the school for students with disabilities and the process for students to receive additional services, i.e., student study team and individualized education program processes;
  - e. the inclusiveness of the school for children presenting diverse religious backgrounds, gender identity, and sexual orientation.
3. Clinical practice sites should also provide candidates the opportunity to learn ways to analyze, monitor, and address how their personal attitudes related to issues of privilege and power in domains including race, age, gender, language, ethnicity, sexual orientation, religion, ableness, socioeconomic matters and more can impact student learning. Candidates need to be able to understand and recognize implicit and explicit racial bias and the ways in which it manifests in the classroom and educational system, and they need to develop an understanding of the teacher’s role in addressing these impacts at the local and systemic level.
4. Clinical practice sites should demonstrate evidence- and assets-based practices and continuous program improvement, cultivate and maintain partnerships with appropriate other educational, social, and community entities that support teaching and learning, place students with disabilities in the Least Restrictive Environment (LRE), provide robust programs and support for mono- and multi-lingual language learners, reflect to the extent possible socioeconomic and cultural diversity, and permit video capture for candidate reflection and TPA completion.

### Program Standard 7: Effective Literacy Instruction

Program Standard 7 Language: [“The credential program’s coursework and supervised field experiences encompass the study of effective means of teaching literacy to young children across all content areas based on California’s State Board of Education \(SBE\)-adopted English Language Arts \(ELA\) and Literacy Standards, English Language Development \(ELD\) Standards, and Preschool Learning Foundations.”](#)

Given the critical nature of literacy, Program Standard 7 and its accompanying TPEs are comprehensive and lengthier than other program standards. Nevertheless, as with all other program standards, programs must ensure that their program design is aligned to all aspects of the standard and candidates are able to learn and practice all of the TPEs. Clinical practice will play an important role in candidates honing their teaching skills in reading and literacy instruction. Programs must ensure that placements provide candidates the opportunity to practice and apply evidence- and assets-based, integrated, active, and culturally sustaining literacy instruction that addresses the crosscutting themes of Foundational Skills, Meaning Making, Language Development, Effective Expression, and Content Knowledge, while designing learning opportunities that meet the criteria listed above. Whenever possible, candidates should have the opportunity to teach foundational skills to both multi- and mono-lingual children (including in children’s home language) while they simultaneously develop their oral English language proficiency.

Placements should provide candidates opportunities to identify children with reading, writing, or other literacy difficulties and disabilities, including children at risk for dyslexia, and to be part of enacting learning plans that are grounded in Universal Design for Learning (UDL) and other strategies to differentiate instruction ensuring all children have access to developmentally appropriate and culturally sustaining materials.

It is important for programs to be aware of the degree to which candidates will have access to deliberate, evidence- and assets-based, meaningful literacy instruction and supports. Programs may need to supplement clinical experiences with applied coursework to ensure candidates have opportunities to practice literacy instruction as called for in program standard 7.

### Program Standard 8: Effective Mathematics Instruction in PK-3 Settings

Program Standard 8 Language: [“The credential program’s coursework and supervised field experiences include the study of effective means of teaching mathematics to young children, consistent with the State Board adopted K-3 Mathematics Standards and Framework and the Preschool Learning Foundations and Curriculum Framework. Coursework and supervised field experiences prepare teachers to model mathematical thinking, inquiry, practice, and processes in their classrooms and to engage in mathematics teaching and learning in a mutually respectful manner with students.”](#)

Programs must ensure that placements provide candidates the opportunity to practice building children’s conceptual understandings of math by building positive relationships with children while drawing on and extending children’s prior mathematical knowledge, understandings, and capabilities. Candidates must be able to practice helping children to develop strong

foundational mathematical understandings and provide them practice using a variety of tools and strategies to solve problems, explain their thinking, and relate math to their lived experiences. Programs need to ensure that candidates will learn to differentiate instruction and learning activities to meet children where they are in their mathematical thinking process.

Clinical practice must prepare candidates to facilitate children's learning in all critical strands of math including 1) number and operations, including counting and cardinality, 2) mathematical thinking and understanding relationships, 3) algebra and functions, 4) measurement and data analysis, and 5) geometry. Programs must ensure candidates learn and practice incorporating mathematical thinking in multiple modalities, including language, gestures, movement, writing, and other means of expression, and learning to ensure all children, including children with disabilities, and mono- and multi-lingual learners have access to and can cultivate their understandings.