

# School-based Clinics

*Bringing together theory and practice in an authentic setting*

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## *Creating a Culture for Success*

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## Contents

Key Terms.....	3
An overview of Early Childhood and Primary School-based Units .....	4
Semester One Units .....	4
Semester Two Units .....	4
Early Childhood and Primary Clinic Arrangements .....	4
An Overview of Secondary School-based Units .....	5
Semester One Units .....	5
Semester Two Units .....	5
Secondary Clinic Arrangements .....	5
School-based Clinics as ‘Learning Communities’ .....	6
Clinic Logistics .....	7
Timeline for School-based Clinics .....	8
Roles of Participants in School-based Clinics .....	9
SCHOOLS .....	9
Classroom Teachers .....	9
School-based Clinic Coordinator .....	9
School Principal .....	10
UNIVERSITY OF CANBERRA .....	10
Unit Convenors and Tutors .....	10
Pre-service Teachers (PSTs) .....	10
UC Liaison Team .....	11
UC Clinic Coordinator(s) .....	11
Frequently Asked Questions .....	12
Appendices.....	13
Procedure for making up for missed school-based Clinics .....	14
Example Student Small Group Agreement Contract .....	16
Example of a Small Group Roll .....	17
Checklist for School-based clinic conversations .....	18
Example of Week 1 school-based clinic orientation session .....	19
School-based Clinic PST Evaluation Questions .....	20
School-based Clinic School Evaluation Questions.....	21
Checklist for meeting with school staff involved in school-based clinics .....	22
Lesson Planning Template .....	23

## Key Terms

ECP	Early Childhood and Primary
PCK	Pedagogical Content Knowledge is the central concept around which the University of Canberra bases its teaching of content subjects in schools.
PST	Pre-service Teacher
Small Groups	For the purpose of the school-based clinics, we ask that the small groups of school students do not exceed 12 – 15 students.
School-based Clinics	A clinic is a weekly, 3-hour session that is hosted at the nominated host school. These clinics consist of one hour of tutorial-style instruction, up to one hour of teaching small groups of school students in teaching teams and then a final hour of post-teaching reflection and preparation for future weeks.
School-based educator	School teachers engaged in a clinic.
School Coordinator	This is the person within each school that has been designated by the Principal or school leadership to be the key point of contact for all school-based clinic business.
Teaching Teams	These are the small teams of pre-service teachers with a minimum of 2 and a maximum of 4 PSTs in each team.
UC Educator	This is the UC Academic or sessional tutor who will be conducting the school-based clinics in schools each week.
UC Unit Convenor	This is the UC Academic who coordinates and oversees the school-based Clinics across multiple schools. In some instances, the unit convenor may also be a tutor in one or more of the school-based clinics.

## An overview of Early Childhood and Primary School-based Units

### Semester One Units

Early Childhood & Primary Units
9886 PCK English
9889 PCK Science
9891 PCK HASS
11337 Teaching Primary Art PG

### Semester Two Units

Primary Units
9888 PCK Maths
9885 PCK The Arts
9887 PCK HPE
11348 Teaching Primary HaSS PG
10177 Inclusion and Diversity – Early Childhood

### Early Childhood and Primary Clinic Arrangements

**What:** Each clinic involves a group of approximately 27 2<sup>nd</sup> or 3<sup>rd</sup> year pre-service teachers (PSTs) who visit the school one day a week for 7 weeks. The ECP session times during the day are 8.30 – 11.30 am and 1 - 4pm. Schools nominate one session. Each group will be accompanied by their UC Educator.

**When:** Clinics usually commence in Week 3 of Term 1 (Semester 1 clinics) and Week 4 of Term 3 (Semester 2 clinics) and go for a duration of 7 weeks (including T4 week 1). The first week's session in a school is an orientation without teaching and includes PST teaching teams meeting with their small groups as well as observation of class/es at the school.

**Resources:** Access to a designated room which seats up to 30 PSTs, computer access and multimedia projector/Smart TV, Wi-Fi access, subject specific resources if appropriate.

**Organisation:** The year level/s to be taught during the clinics are determined by the school in consultation with the UC Unit convenor. The lesson content for each session is determined in consultation between the UC unit convenor and the classroom teacher/s in advance of the clinics commencing each semester.

**How:** Each 3-hour session generally has 3 phases facilitated by the UC Educator. In the 1<sup>st</sup> phase, the PSTs meet in the designated room for some input and preparation time. The 2<sup>nd</sup> phase involves a 45–60-minute teaching session where a team of 3–4 PSTs work in a classroom with a small group of students. In the 3<sup>rd</sup> Phase, the PSTs return to the designated room for a debrief and lesson preparation for the following week.

**Communication:** The unit convenor and a member of the school liaison team will meet with the school before the program commences to go through details. This session can involve relevant school staff who are available and desirably some or all of teachers who will have PSTs in their classes. For the duration of the clinics, the UC Educator is present at all sessions and a member of the UC school liaison team will drop into sessions occasionally in a supportive role.

## An Overview of Secondary School-based Units

### Semester One Units

Secondary
All PCK Methods units
All MTeach Methods units

### Semester Two Units

Secondary
All PCK Methods units
All MTeach Methods units

### Secondary Clinic Arrangements

**What:** Each clinic involves a group of 3<sup>rd</sup> and 4<sup>th</sup> year undergraduate pre-service teachers (PSTs) or 1<sup>st</sup> & 2<sup>nd</sup> year postgraduate PSTs in the school one day a week. *Arrangements are dependent on each host school's timetable.* Each group will be accompanied by their UC Educator.

**When:** Clinics usually commence in Week 3 of Term 1 (Semester 1 clinics) or Week 5 of Term 3 (Semester 2 clinics) for 6 weeks. The first session in a school is an **orientation** without teaching and includes PST teaching teams meeting with their small groups as well as observation of class/es at the school.

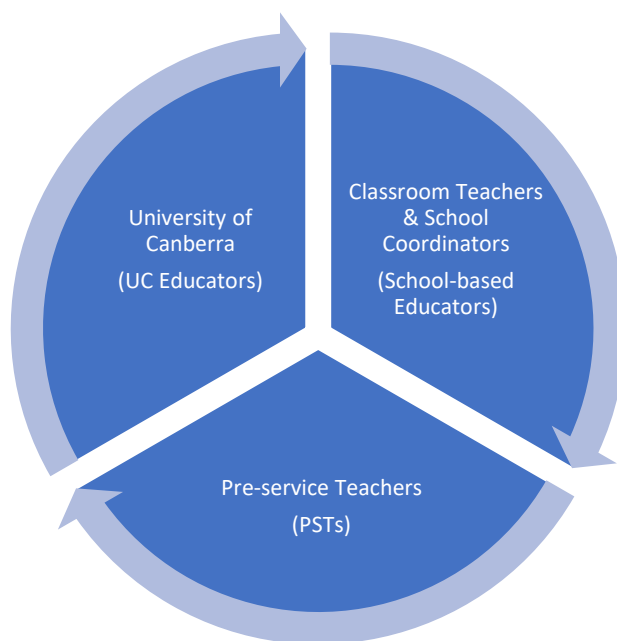
**Resources:** Access to a designated room which seats up to 30 PSTs, computer access and multimedia projector/Smart TV, Wi-Fi access, subject specific resources if appropriate.

**Organisation:** The year level/s to be taught during the clinics are determined by the school in consultation with the UC Unit convenor. The lesson content for each session is determined in consultation between the UC unit convenor and the classroom teacher/s in advance of the clinics commencing each semester.

**How:** Each 3-hour session generally has 3 phases facilitated by the UC Educator. In the 1<sup>st</sup> phase, the PSTs meet in the designated room for some input and preparation time. The 2<sup>nd</sup> phase involves a 60-minute teaching session where a team of 3-4 PSTs work in a classroom with a small group of students. In the 3<sup>rd</sup> Phase, the PSTs return to the designated room for a debrief and lesson preparation for the following week.

**Communication:** The unit convenor and a member of the school liaison team will meet with the school before the program commences to go through details. This session can involve relevant school staff who are available and desirably some or all of teachers who will have PSTs in their classes. For the duration of the clinics, the UC Educator is present at all sessions and a member of the UC school liaison team will drop into sessions occasionally in a supportive role.

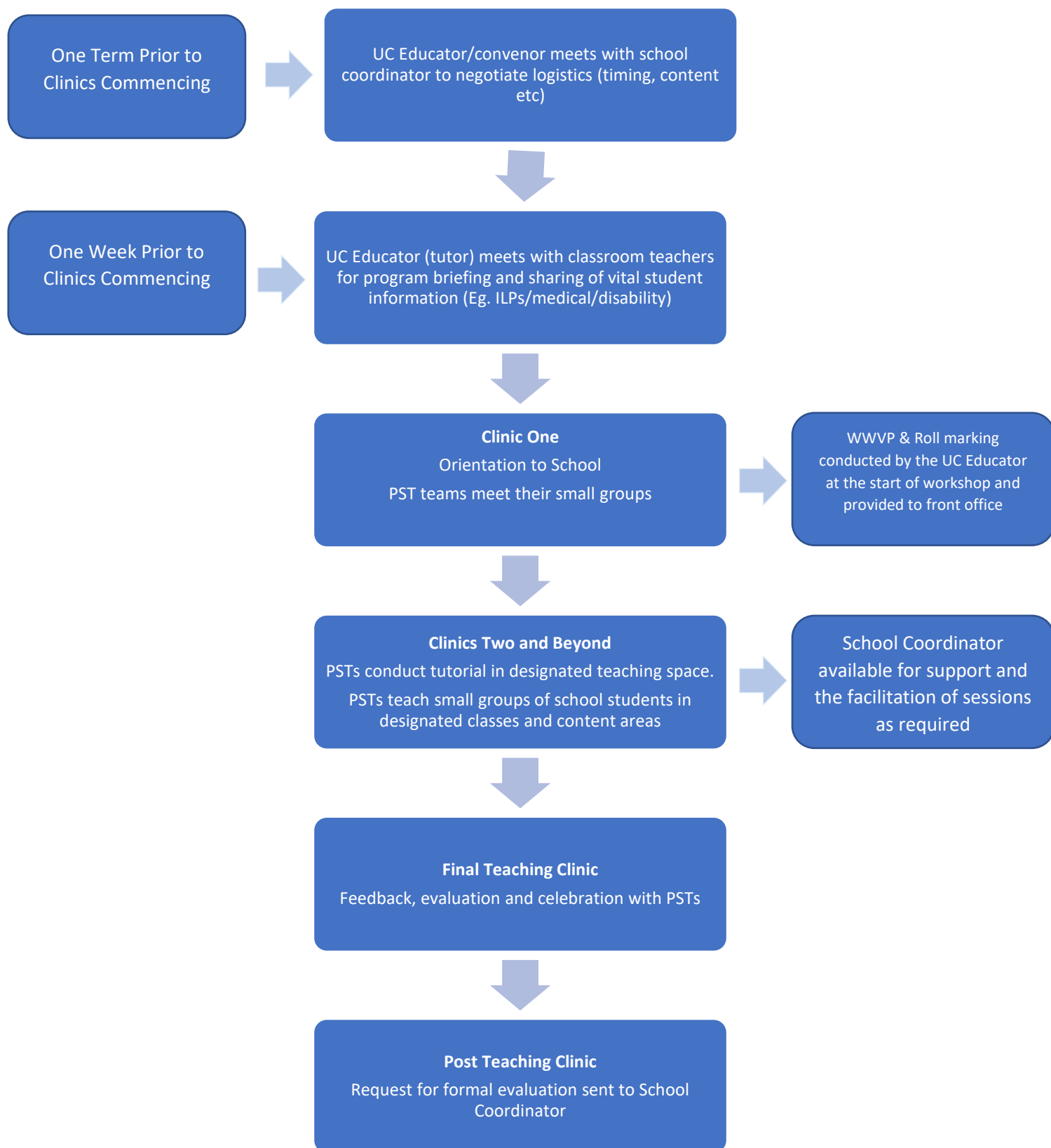
## School-based Clinics as 'Learning Communities'



## Clinic Logistics

<p style="text-align: center;"><b>STAFFING</b></p> <p>Classroom teachers are welcoming and provide support and feedback to PSTs. School coordinator facilitates program and provides extra supervision during teaching sessions.</p> <p><b>Administration: and roll marking</b> PST Sign-in: PSTs are expected to sign in with the UC Educator at the start of every clinic. Roll marking is conducted by the university educator at the start of each workshop and then the roll is provided to the front office. Working with Vulnerable People cards are collected, copied, and returned to students in the orientation session Alternatively, the UC Educator will send a file containing scanned copies of the PSTs' WWVP cards on preference of the school.</p>	<p style="text-align: center;"><b>SPACE</b></p> <p><b>Tutorials:</b> Classroom space is ideal for tutorials. Preferably a designated room to seat 30 or more people. It is best if the same room can be used each week and for both phases 1 &amp; 3 of each session. ICT set-up with multimedia access in the room Internet access for Pre-service Teachers will be arranged by UC through Shared Services. Where possible, Google Classrooms set up (Secondary PSTs only) – access arranged by UC through Shared Services and set up facilitated by schools.</p> <p><b>Teaching spaces:</b> Ideally, a maximum of 2 small groups of school students per room which may include accessing an additional adjacent room or rooms with staff school educators circulating to provide duty of care to the pre-service teachers for the students.</p>
<p style="text-align: center;"><b>SMALL GROUPS</b> (Number and size of groups determined by school and UC educator in advance)</p> <p>Schools select diverse groups of students for PST teaching teams to work with each week.</p> <p>Ideally this will be from the same class and the same group of school students to work with for the duration of the clinics.</p> <p>Schools prepare lists in advance for UC educator including room allocation and Google Classroom access code where applicable (see Appendix for example).</p>	<p style="text-align: center;"><b>TIMETABLING</b> (Secondary)</p> <p>Flexibility is key to successful timetabling.</p> <p>A 1-week timetable works well with few issues. Where a school operates with a 2 week/10-day timetable, a conversation with the UC Unit Convenor and the school coordinator is undertaken regarding possible accommodations. One option is to schedule the clinics on the same day at different times to allow them to work with the same class/lines for the duration of the clinics. This can be negotiated on a case-by-case basis where required.</p> <p>Negotiation is also important to create optimal learning spaces.</p>

## Timeline for School-based Clinics





## Roles of Participants in School-based Clinics

UC School based clinics are conducted in partnership with schools. The Faculty of Education values the professional expertise of its partner schools and we are seeking to ensure the support we provide is consistent with this professional partnership. To achieve the desired outcomes of School based clinics it is important that all participants have a clear understanding of their own role as well as being familiar with the role of other key personnel involved. The relationship between participants may then be based on clear communication and cooperation.

### SCHOOLS

#### Classroom Teachers

- Classroom teachers involved in a clinic play an important role in fostering the professional learning of Preservice teachers (PSTs). School-based clinics allow PSTs to work alongside teachers who are willing to share their experience, strategies, encouragement, and support. During, or at the end of each teaching session, classroom teachers are encouraged to share their reflections on the lesson dynamic with the PSTs (e.g., planning, appropriateness of teaching and learning strategies, resources used, timing, assessment, classroom environment etc.)
- There is no planning or directing responsibilities for classroom teachers involved in school-based clinics. The clinics provide an opportunity for classroom teachers to observe their own students in a different learning environment as well as to observe a wide variety of teaching and learning strategies.
- PSTs value the 'presence' and support of classroom teachers while they are actively engaged in teaching small groups of students. On rare occasions, the intervention of a classroom teacher may be appropriate to support a PST. PSTs feel uncomfortable if a classroom teacher displays little or no interest in the clinic teaching and learning phase or chooses to participate in alternate activities.

#### School-based Clinic Coordinator

The coordinator is appointed by the Principal to coordinate and oversee the smooth running of the clinics within the school. The Coordinator has responsibility for:

- Facilitating the establishment of a collegial working team among the classroom teachers the PSTs and university educators.
- Arranging Year level(s) and curriculum topics for the clinics and organising small mixed groups of students for each teaching clinic.
- Where appropriate, facilitating the sharing of relevant background information on particular students in small groups with PSTs, such as ILPs, disabilities or medical matters.
- Providing an orientation to the school including information about the school's pedagogical and behaviour management approaches, providing information about sign-in and WWVP responsibilities, parking arrangements and professional expectations of PSTs.
- Briefing on school and system policies and organisation relevant to the Professional Experience (schools may produce and provide an Orientation Information Booklet to Preservice Teachers).
- Explaining the legal obligations while in the school including Occupational, Health and Safety policies used in the school.

## School Principal

When hosting of a school-based clinic is undertaken by a school, it is under the administrative responsibility of the Principal. The Principal's role includes:

- Supporting the school-based clinic coordinator responsible for administering the program, including ensuring that required resources are made available to the PSTs and their UC educator.
- Welcoming Preservice Teachers to the school.
- Ensuring that classroom teachers involved are aware of not only the rationale for the clinics and their role but also that PSTs do not have duty of care for school students and therefore are not to be given sole responsibility for the supervision of students.

## UNIVERSITY OF CANBERRA

### Unit Convenors and Tutors

The unit convenor is responsible for communicating and negotiating with UC and school staff particularly during the planning phase and for supporting the UC tutor/s during the implementation phase.

UC Tutors are responsible for facilitating weekly workshops and other activities associated with the delivery of the unit. These include:

- Reviewing and commenting, where appropriate, on weekly teaching plans prior to their implementation.
- Engaging in professional conversations with PSTs and encouraging them to critically reflect.
- Assisting PSTs to improve the planning, implementation and evaluation of teaching through regular feedback.
- Regularly discussing progress and suggesting areas for continued focus.
- Preparing the PSTs with strategies for effective small group management and organisational skills required to work in small groups.
- Addressing any issues that arise between members of small groups.

### Pre-service Teachers (PSTs)

Preservice Teachers take responsibility for their learning, ensuring that they:

- are familiar with all components of their school-based clinic.
- become familiar with the unique contextual factors that characterise the school in which they are hosted.
- adjust quickly to the school setting in a manner that allows teachers to accept them as colleagues and students to accept them as teachers.
- are familiar with the relevant components of the Australian Curriculum specific to the unit.
- complete and accept the 'Small group work agreement/ contract' (see appendix)
- submit their weekly lesson plan to their tutor 48 hours in advance using the designated lesson planning template.
- fulfil all specific curriculum requirements for their unit.
- conform to school policy concerning dress and professional behaviour.
- conform to school and Directorate/school policies regarding appropriate use of ICT resources.
- ensure all resources borrowed from the school are returned prior to completion of the clinics.

### UC Liaison Team

- Establishing and developing relationships with their schools hosting clinics.
- Visiting school-based clinics at least twice per semester to check-in with the PSTs and teachers involved to see how things are going. Feedback from these visits is important and also contributes to the evaluation of this element of the program.
- Clarifying the roles and expectations of parties involved in the school-based clinics.
- Listening and supporting the needs of stakeholders with respect to their roles.

### UC Clinic Coordinator(s)

The UC coordinators are responsible for the overall management of school-based clinics in schools and work closely with UC and school-based staff in the planning, implementation and evaluation of clinics. The coordinators' roles include:

- Seeking expressions of interest from school-based coordinators with respect to the hosting of clinics each semester.
- Communicating with schools to clarify their availability and preferences.
- Allocating clinics in consultation with host schools.
- Arranging meetings between relevant UC and school staff to determine logistics for individual clinics.
- Supporting UC and school staff involved in the delivery of clinics.
- At the completion of the clinics, arranging evaluation from participating schools, PSTs and UC staff.
- Liaising with UC timetabling for the scheduling of clinics on and off campus.

## Frequently Asked Questions

### **Does the school have a chance to review lesson plans beforehand?**

Yes- PSTs submit their lesson plans to their tutor at least 2 days in advance and these can be emailed to the school beforehand upon request. It is a school's choice. Currently, some schools do request to see them, and others don't depending on the school's position and available time. It is not an expectation of classroom teachers to review lesson plans. This is explicitly the role of the UC Educator in that clinic.

### **Do the classroom teachers, who are observing the PST's lessons, have an opportunity for feedback to the PSTs?**

Yes- We view 'School based clinics' as *learning communities* which include classroom teachers. Therefore, classroom teachers are encouraged to share their reflections on the lesson with the PSTs e.g., planning, appropriateness of teaching and learning strategies, resources used, timing, assessment, classroom environment etc. PSTs highly value feedback from school-based educators.

### **How much information about individual students should schools share with PSTs?**

Whatever information you believe will assist the PSTs to maximise the learning opportunities for their small groups. Information from ILPs and other relevant sources can be very helpful.

### **Is the school library or a staffroom suitable for the tutorial phase of the clinic?**

They are suitable if these spaces are available and allow PSTs to focus on their learning without interruption. However, a free classroom space is ideal as it allows the UC educator to model pedagogical practices and processes.

### **What ICT equipment and access is required for a clinic?**

UC arranges ICT access for PSTs through Shared Services beforehand. Primary PSTs generally have internet access only and Secondary PSTs also have Google Classroom access. The UC educator requires ICT access in the tutorial room and can use their own laptop or a device provided by the school.

### **What resources does the school need to provide?**

Apart from human and ICT resources for all clinics, some clinics e.g., Arts, HPE, may negotiate with the school to use school resources. This is entirely at each school's discretion.

### **How many 'spaces' does a school need to provide for each of the small learning groups?**

We suggest a maximum of 2 small groups of students per learning space which may include accessing additional adjacent rooms or other spaces with classroom teachers circulating to provide duty of care for the students.

### **Can we expect PSTs to undertake a summative assessment with their small group during a clinic?**

There is a focus for PSTs on formative assessment in the clinics. A small one-off summative task towards the end of the clinics is possible depending on the unit and can be negotiated with the UC Educator.

# Appendices

## Procedure for making up for missed school-based Clinics

As our PCK clinics have TQI accreditation attached to them, pre-service teachers are required to attend ALL clinics during the semester. To be faithful to the accreditation of our courses, the PSTs need to be 'engaged' in all clinics and are required to make up for all absences from clinics during the semester. As the attendance policy for PCK clinics states:

*Successful engagement with all learning activities in this accredited Initial Teacher Education course is necessary to demonstrate that you have met the Graduate career stage of the Australian Professional Standards for Teachers (AITSL, 2011).*

*Participation in 'school based' tutorial classes is a compulsory condition of this unit, and attendance will be recorded. You must participate in 100% of the 'school based' tutorial classes to pass this unit. In the event that you cannot attend your assigned session due to illness or extreme circumstances, you must provide appropriate documentation to the Unit Convener as soon as possible. In the case of sessions missed due to illness or extreme circumstances, both the academic content and the professional experience component are required to be made up. More than two documented absences may lead to failure of the unit due to non-completion.*

### Catch up session requirements

- If the PSTs are absent from any clinic, they are required to work directly with the unit convenor to negotiate the make up time in a school setting.
- For each clinic absence, the PST is required to make up 3 hours of attendance in a school setting.
- Catch up sessions must be undertaken in the same school in which the original clinics took place.

Please note, where possible, our first option is to ask the PST to attend an alternative clinic in the same unit, at another school. However, if they cannot do this then the above-mentioned process should be applied.

We appreciate that make-up sessions may be a challenge for schools to accommodate. Therefore, the following guidance has been developed to support schools with the facilitation of these make-up sessions.

Please note, the expectation is not that the PST will teach but that they are an extra support person in whatever setting you deem appropriate.

### Options may include (but are not limited to):

- Option 1** Shadow one teacher for the three hours in a class.
- Option 2** Work with individual teachers or a teaching team to create teaching and learning resources etc.
- Option 3** Work one-on-one or a small group of students on a literacy or numeracy project or targeted intervention as provided by the classroom teacher or leadership team.
- Option 4** Work in an LSA capacity with an individual student

Ideally, the PST needs to make up the absence at the earliest convenience of the school and this is to be coordinated between the PST, the unit convenor and the school coordinator/SPEC.

#### **Process for Unit Convenors**

- At a midpoint (after 3 clinics) and then the end of the clinics, the unit convenor compiles a list of student names who have missed any workshops and have not already made them up.
- Unit convenors then contact the school coordinator/SPEC to request that they nominate suitable dates and times for the PSTs to do the make-up sessions. The convenor then communicates these to the PSTs and confirms their attendance against the offerings from the school.
- Finally, the unit convenor communicates back to the school who is coming and when.
- School coordinator informs convenor when make-up day/s have been completed.

## Essential Agreement: PCK Clinics

*Please complete, sign and return this agreement to your tutor.*

School:

Group Members:

We accept the following responsibilities within our small teaching group:

**Collaboration:** How? When? Where?

**Meeting Responsibilities:** individual roles, assignments

**Professionalism:** dress, timing, behaviours

**Communication:** preferred method(s), updates, changes, problems

**Others determined by group:**

**Signed:** \_\_\_\_\_



## Example of a Small Group Roll

Group X (group number e.g. 5) – Room Y (classroom)  
(PST) name/s

Google classroom code: # % \$ @ (where applicable)

Class code	Classroom Teacher	First name	Surname	Week 1	Week 2	Week 3	Week 4	Week 5
*****	Jo Bloe	Student A	Student A					
*****	Jo Bloe	Student B	Student B					
*****	Jo Bloe	Student C	Student C					
*****	Jo Bloe	Student D	Student D					
*****	Jo Bloe	Student E	Student E					
*****	Jo Bloe	Student F	Student F					
*****	Jo Bloe	Student G	Student G					

## Checklist for School-based clinic conversations

Unit: \_\_\_\_\_

School: \_\_\_\_\_

Principal: \_\_\_\_\_

Coordinator/ school contact: \_\_\_\_\_ Staff involved in clinic: \_\_\_\_\_

Timeline of sessions	Include stand-down time if required for holiday access Orientation session (Week 1) – who? what? when? - including school culture, learning approach, student management, specific programs etc.	
Resources	Access to a room which seats up to 30 PSTs, computer access and multimedia projector, WiFi access, subject specific resources if required.	
Session times	Tutorial and teaching prep _____ Teaching time- _____ Reflection and teaching prep _____	
Teaching Setting up student groups (3 PSTs/group)	Year level / _____ No. of students? _____ Group size: 9/ 10 groups of _____ Arranged for Week 1 (school) Mixed groups Possible spaces for 9 or 10 groups? Opportunity to meet with classroom teachers involved Ongoing communication with classroom teachers involved. Invitation to classroom teachers to join in reflection session Lecturer vets PSTs lesson plans weekly	
Curriculum	Discussion of UC unit outline and assessment Seek information about relevant school curriculum/program Relevant AC Achievement standards?	
Other logistics	WWVP verification Weekly roll marking, school requirements? Parking for PSTs PSTs accessing school at other times	
What PSTs value	A welcoming school environment Classroom teachers' interest and support	
Other matters?		

## Example of Week 1 school-based clinic orientation session

Time	What	Who	Where
9 - 9:30 am	UC Educator to meet with PSTs		
9:30 - 10am	Introduction & welcome <ul style="list-style-type: none"> <li>- Principal and Deputy</li> <li>- School philosophy</li> <li>- Student management</li> <li>- School programs</li> <li>- Admin</li> <li>- Bathrooms, Fire exits, etc.</li> </ul>		
10 - 10:30 am	School approach to teaching & learning		
10:30am - 11am	PSTs meet with small groups Get to know you activities		
11am - 11:30 am	UC Educator to meet with PSTs Planning for next week		
11:30 - 11:50pm	Observations - Year 7 classes <ul style="list-style-type: none"> <li>- Year 7 -1</li> <li>- Year 7 -2</li> <li>- Year 7 -3</li> <li>- Year 7 -4</li> <li>- Year 7 -5</li> <li>- Year 7 -6</li> <li>- Year 7 -7</li> <li>- Year 7 -8</li> </ul>		
11:50 - 12pm	UC Educator to meet with PSTs Reflection & wrap up		

## School-based Clinic [PST](#) Evaluation Questions

The following is a sample of the questions that PSTs are asked in an evaluation survey at the end of every Primary and Secondary PCK Clinics.

### Section One: Unit and Location

1. Which unit did you undertake and at which school?

### Section Two: Logistics

2. Please respond to the following statements (on a Likert Scale from Strongly Disagree to Strongly Agree)
  - My host school was welcoming and hospitable.
  - The school staff supported my teaching and learning.
  - Access to school ICT met our needs.
  - The structure of the 3-hour workshop was ideal.
  - The teaching space for tutorials met our needs.
3. Please provide additional comments you wish to add about any of the above statements about logistics.

### Section Three: My Teaching and Learning Practice

4. Please respond to the following statements (on a Likert Scale from Strongly Disagree to Strongly Agree)
  - My teaching practice has been enhanced.
  - My lesson preparation has improved.
  - My formative assessment practice has improved.
  - My classroom management practices have improved.
  - My use of appropriate ICT has improved.
  - I feel more confident in my teaching practice.
  - My understanding of how classes operate has broadened.
  - My understanding of how school operate has broadened.
5. Please provide additional comments you wish to add about any of the above statements about your teaching and learning practice.

### Section Four: Clinic Impact

6. How do you believe the impact of the clinic could be improved?
7. Other comments (optional)

## School-based Clinic School Evaluation Questions

The following is a sample of the questions that schools are asked to respond to via a survey after the conclusion of the PCK clinics each semester.

### Section One: School Details

1. School Name

### Section Two: Opinions and Experiences of school-based clinics

2. Please share your opinion/experiences by responding to the following statements:  
(on a Likert Scale from Strongly Disagree to Strongly Agree)
  - Hosting school-based teaching clinics has been a positive experience for our school
  - Hosting school-based teaching clinics has had a positive impact on our students.
  - Hosting school-based teaching clinics has had a positive impact on our staff.
  - Pre-service teachers are benefitting from the experience of school-based teaching clinics.
  - Communication with UC staff has worked effectively.
  - We look forward to hosting future school-based teaching clinics.
3. Please provide any further comments related to the above statements

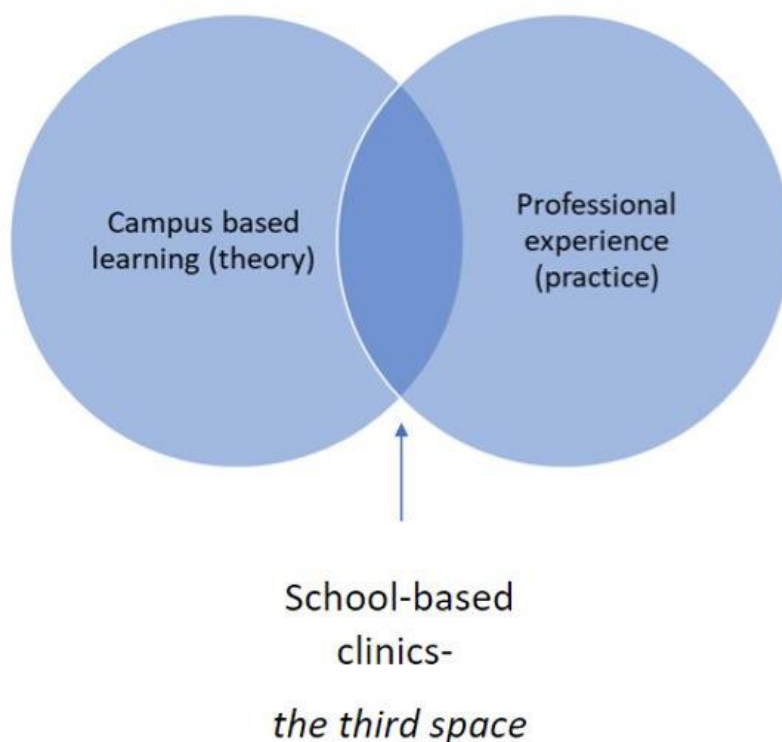
### Section Three: Additional Feedback

4. What has worked well?
5. What has not?
6. What suggestions do you have for improvements?

## Checklist for meeting with school staff involved in school-based clinics

1. Discuss the school-based clinics' objectives and purpose and underlying theory

### Theory-practice dichotomy



2. Provide an overview of the structure and timeline of clinics  
First week in school – Orientation to the school & Ice breaker activity with students from teaching group  
Weeks 2-7: Teaching episodes
3. Discuss the roles and responsibilities of different clinic stakeholders ([see page 9 for details](#))
4. Discuss Lesson planning arrangements – copies provided to school if requested ([see template](#))
5. Small group composition  
5.1. Share information on individual students
6. Clarify curriculum content and expectations for the teaching episodes
7. Discuss the process for make-up lessons for missed classes ([see page 14 for details](#))
8. Q & A

## Lesson Planning Template

<b>Class:</b>	<b>Date:</b>	<b>Name(s):</b>
<b>Curriculum Content Area:</b>	<b>Lesson Topic:</b>	
<b>Key Words/Concepts:</b>		
<b>Links to prior learning</b> <i>(What do the learners already know and how is this contributing to the planning of this specific lesson? How does this specific lesson link to other learnings?):</i>		
<b>Links to Curriculum</b> <i>(What Achievement Standard(s) are you addressing in this lesson? What Content Descriptor(s) are you working towards? Have you considered the General Capabilities and Cross Curriculum Priorities in your planning? Where are these evident?):</i>		
<b>Learning Intention(s)</b>	<b>Success Criteria</b>	<b>Assessment</b>
	<i>Behaviours that contribute toward achievement of the learning intention(s)</i> <i>Must be <b>clear, specific, observable</b>.</i> <b><u>By the end of this lesson, the learners will be able to:</u></b>	<b>Diagnostic/Formative/Summative:</b> Assessment for/as/of learning <i>(Strategies which will be used to assess learners' attainment of learning intentions and success criteria)</i>

## LESSON SEQUENCE

Timing	Lesson Content ( <i>What is Taught</i> )	Teaching Strategies / Learning Experiences ( <i>How it is taught</i> )  <i>Needs to be explicit – what are the learners going to do and why? Must consider principles of differentiation within the lesson planning. How will you provide multiple means of Representation, Action and Engagement &amp; Expression?</i>	Resources and Organisation ( <i>Materials Required &amp; Individual PST roles identified</i> )
INTRODUCTION			
DEVELOPMENT			
CLOSURE			



Strategies to support the safe, responsible and ethical use of resources (including ICTs where used)	
<b>Lesson Reflection/Evaluation</b> (To be completed after each lesson) <i>What worked well? What could be improved?</i> <i>Ideas for future lesson.</i>	

**Reference List** *(A reference list is essential for all links to literature made within your lesson plans)*

**Appendix** *(Please append all relevant resources that are being incorporated into the lesson plan)*