## DESE logoProgram Overview Worksheet

The Early Literacy Interim Review process is designed to recognize sponsoring organizations’ unique contexts and structures to gather a comprehensive evidence base for decision-making. The Program Overview Worksheet is the initial opportunity to orient DESE and the Review Team to your SO’s structure and approach to early literacy in educator preparation. The information collected below will also support DESE’s preparation for focus groups and interviews.

The Required Documents and Candidate Artifacts listed in the tables below must also be submitted electronically along with the SO’s completed Program Overview Worksheet. While not required, the SO may also decide to reference these documents within relevant prompt responses.

Additional documents may be requested as part of the Follow-Up Inquiry based on evidence gathered during the Launch and Initial Inquiry stages of the review.

### Required Documents

|  |  |  |
| --- | --- | --- |
| **Domain** | **Document Category** | **Description** |
| PAR | Partnership MOU(s) | Memorandums of Understanding (MOUs) for any formalized PK-12 school/district and non-PK-12 external partnerships, as applicable. |
| FBE | Practicum Handbook(s) | Details about practicum policies and procedures (typically in the form of a practicum handbook). |
| All | Program(s) of Study | **For each licensure program,** the SO submits a program of study that outlines the course titles (required and elective), the intended course progression, and any additional program components (e.g., field-based experiences). If a program has multiple pathways (e.g., a traditional practicum pathway and a residency pathway both leading to a post-baccalaureate Elementary endorsement), a separate program of study should be submitted for each pathway. Any required pre-practicum or practicum experiences should be noted with their corresponding course(s).   Tip: SOs should not need to create this for the DESE Early Literacy Interim Review. They may have a similar document with a different name already in existence (e.g., advising sheets, course checklists). |
| All Early Literacy Program Approval Criteria | Early Literacy Matrix | The SO completes a separate Early Literacy Matrix for each Elementary, Early Childhood, and/or Moderate Disabilities PK-2/PK-8 program to identify the required coursework in which the described knowledge and skills are being demonstrated **up to and at** the requisite practice level. |

### Candidate Artifacts

For artifact categories that are relevant to all candidates, files must be shared for the candidates identified in DESE’s random sample. For categories that do not apply to all candidates, your SO will identify relevant files.

|  |  |  |  |
| --- | --- | --- | --- |
| **Domain** | **Artifact Category** | **Description** | **Sample** |
| FBE | Performance Assessments - Taken from Random Sample | Evidence of how the SO implements performance assessments consistently within and across programs to improve practice and ensure only candidates who are ready for full responsibility in the licensure role complete the program.    Each CAP file should include:   * CAP Form * CAP Observation Form for all required observations (including completed Early Literacy Observation Form) * Formative Assessment Form * Summative Assessment Form     Files should document the types of feedback provided to candidates after observations conducted by the program supervisor and/or supervising practitioner. | Completers randomly selected by DESE   (sample size determined based on number of completers over the last 3 years)~~.~~    DESE will ensure that the sample includes completers from each of the relevant Early Literacy programs and that the sample only includes candidates for whom the Early Literacy Observation Form was required  Random sample list will be provided to the SO by April prior to the review year. |

## The Partnerships Domain

**The Partnerships Domain:** *The sponsoring organization has intentional and collaborative PK-12 partnerships that benefit candidates/completers and schools/districts, including supporting the cultivation of an increasingly diverse and effective educator workforce and anti-racist and culturally and linguistically sustaining learning experiences for both candidates and PK-12 students.*

**\*Note:** Your organization listed all partner districts for Elementary, Early Childhood, and Moderate Disabilities PK-2/PK-8 licensure programs in the “PK-12 Partners” tab of the Launch Worksheet.

Your response below should be no more than one to two brief paragraphs or a bulleted list. Other than those requested as a required document or candidate artifact, no supplemental or linked materials will be accepted at this time.

**Formal Partnership Structures**

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| --- |
| Briefly describe any formal partnership structures that may help the review team understand the design of your SO’s PK-12 partnerships as they relate to Early Literacy programs (e.g., MOUs with a district or districts, partnership tiers, cohort-based placements, participation in Early Literacy Consortium). |
|  |

## The Instruction Domain

Complete Prompts 1-3 for each Early Literacy licensure program or program grouping offered by the SO. For the Early Literacy Interim Review, the only allowable program groupings are as follows:

* Initial, Baccalaureate, Early Childhood
* Initial, Baccalaureate, Elementary
* Initial, Baccalaureate, Moderate Disabilities PK-8 **AND** Initial, Baccalaureate, Moderate Disabilities PK-2
* Initial, Post-Baccalaureate, Early Childhood
* Initial, Post-Baccalaureate, Elementary
* Initial, Post-Baccalaureate, Moderate Disabilities PK-8 **AND** Initial, Post-Baccalaureate, Moderate Disabilities PK-2

Evidence collected and evaluated during the Initial Inquiry and Follow-Up Inquiry will align with these groupings. Each grouping will have its own worksheet in the Follow-Up Inquiry. The [required documents](#_Required_Documents) must be provided for each program.

**Instruction Domain:**   
**Program Grouping 1: Baccalaureate Early Childhood**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level  (Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Early Childhood, PreK-2 | Bacc. |  |  |  |  |

**Prompt 2:**In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |

**Instruction Domain: Program Grouping 2: Baccalaureate Elementary**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level  (Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Elementary, 1-6 | Bacc. |  |  |  |  |

**Prompt 2:**  
In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |

**Instruction Domain:**   
**Program Grouping 3: Baccalaureate Moderate Disabilities PK-8 and PK-2**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level  (Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Moderate Disabilities, PK-8 | Bacc. |  |  |  |  |
| Moderate Disabilities, PK-2 | Bacc. |  |  |  |  |

**Prompt 2:**In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |

**Instruction Domain:**   
**Program Grouping 4: Post-Baccalaureate Early Childhood**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level  (Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Early Childhood, PreK-2 | Post-Bacc. |  |  |  |  |

**Prompt 2:**In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |

**Instruction Domain:**   
**Program Grouping 5: Post-Baccalaureate Elementary**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level**  **(Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Elementary 1-6 | Post-Bacc. |  |  |  |  |

**Prompt 2:**  
In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |

**Instruction Domain:**   
**Program Grouping 6: Post-Baccalaureate Moderate Disabilities PK-8 *and* PK-2**

**Prompt 1:**  
Complete the following table with information for each license program included in this program grouping. If your organization is not approved for a listed program, indicate “Not Offered” in the column for all variations or pathways.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **License, Including Grade Span** | **Level**  **(Bacc. or Post-Bacc.)** | **List all variations or pathways for this program** | **Program Delivery Model**  (On-campus/Hybrid/  Fully Online) | **Are any aspects of the program requirements asynchronous?** (Provide detail if yes) | **Offered at a Satellite Campus?** [If yes, identify location and included pathway(s)] |
| Moderate Disabilities, PK-8 | Post-Bacc. |  |  |  |  |
| Moderate Disabilities, PK-2 | Post-Bacc. |  |  |  |  |

**Prompt 2:**  
In the table below, identify the stakeholder group(s) responsible for delivering program content.

|  |  |  |
| --- | --- | --- |
| **Stakeholder Group** | **Delivers Any Program Content?** | **Which courses or components of the program of study are delivered by this group?** |
| Full-Time Education Faculty |  |  |
| Part-Time Education Faculty |  |  |
| Arts & Sciences Faculty |  |  |
| Other: (Please describe) |  |  |
| Other: (Please describe) |  |  |