

Quality Assurance Institute  
Case Study: Phase 2  
Peeling Back the Layers: How the System Currently Operates  
At the Crossroads: Summit Valley College of Education  
*Navigating Quality Assurance in an Era of Accountability*

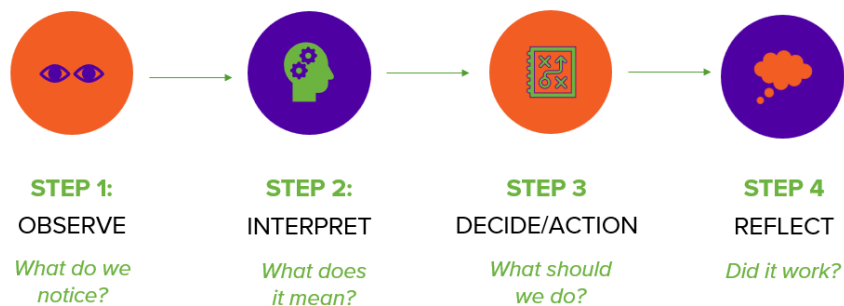
### Engaging in Data Dialogues

“The object of dialogue is not to analyze things, win arguments, or exchange opinions. Rather, it is to suspend opinions and look at them.”<sup>1</sup>

In a strong Quality Assurance System, data is not merely reviewed for compliance; it is used collaboratively to construct shared understanding, surface assumptions, and guide continuous improvement.<sup>2</sup> Effective dialogue requires participants to suspend judgment, inquire into patterns, and engage evidence with curiosity rather than defensiveness.

There is a distinct difference between dialogue and discussion. Dialogue involves an open exchange of ideas in which participants listen, ask questions, and work toward shared understanding. Discussion, by contrast, is often focused on advocacy and decision-making, with participants advocating their own ideas. Effective dialogue requires participants to suspend judgment, explore assumptions, ask questions, reflect, and, most importantly, listen. This resource outlines a process for engaging with data to build shared understanding and support continuous improvement.

#### Process



A data dialogue process is a structured approach that helps teams use information effectively to improve outcomes and make informed decisions. The process typically begins with **observation**, where participants carefully examine the available data to identify patterns, trends, strengths, or concerns. Next comes **interpretation**, during which the team discusses what the data means, considers possible root causes, and connects the findings to broader goals or experiences. After interpreting the information, the group moves into **decide/action**, where they determine specific strategies, interventions, or next steps based on the insights gained from the data. Finally, the process concludes with **reflection**, allowing participants to evaluate the impact of their actions, consider what was successful or challenging, and identify adjustments that can improve future decision-making and continuous growth.

Yet, before engaging with the data, it is important to surface the assumptions and predictions we bring into the conversation. Every participant enters a data dialogue with prior experiences, beliefs, and expectations that shape how information is interpreted. Making these assumptions visible creates a stronger foundation for analysis by helping teams distinguish between what they expect to see and what the evidence actually reveals. This reflective step serves as a critical precursor to the analysis, interpretation, and action process, promoting curiosity, reducing defensiveness, and supporting more meaningful continuous improvement conversations. It is only after you engage in this reflection that you begin to engage with the data.

<sup>1</sup> Bohm, D. (1996). *On dialogue*. Routledge.

<sup>2</sup> Love, N., Stiles, K. E., Mundry, S., & DiRanna, K. (2008). *The data coach's guide to improving learning for all students: Unleashing the power of collaborative inquiry*. Corwin Press.



## Section 5: Before You See the Data — Predictions

Before examining the data, take 5–7 minutes individually to surface your assumptions and predictions. This step is essential. It helps you notice when data confirms your expectations and when it surprises you.

### Individual Prediction Protocol

Respond to the following prompts from your persona’s perspective.

I assume...

I predict...

I wonder...

My assumptions are influenced by...

Then share predictions with your group before opening the data section. Note where your predictions align and where they diverge. Those divergences often point to the most important tensions in the case.

Strong quality assurance systems rely on the ability to move beyond assumptions and engage honestly with evidence. The next section provides multiple sources of data related to candidate performance and program outcomes at SVCU. As you analyze this information, consider what the data suggests about strengths, areas of concern, system coherence, and opportunities for continuous improvement. Pay particular attention to where patterns align across data sources and where inconsistencies or tensions begin to emerge.

## Section 6: The Data – SVCU

### Data Set 1a: State Licensure Performance Assessment — Pass Rates by Program

The state’s performance assessment for initial licensure uses a four-domain framework. Candidates submit three evidence tasks evaluated by trained scorers on a 1–4 scale, with a minimum passing score of 2.5 per task and an overall composite minimum of 2.75. Scores below 2.0 on any task require mandatory remediation before resubmission.

Performance is evaluated across four levels, ranging from Level 1, where the candidate demonstrates limited or ineffective teaching skills, to Level 4, where the candidate consistently exhibits distinguished and highly effective teaching practices. Levels 2 and 3 represent growth toward proficiency, with Level 2 indicating developing but



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inconsistent skills and Level 3 reflecting the expected proficiency of a beginning teacher.

Program	2021 Pass %	2022 Pass %	2023 Pass %	2024 Pass %	3-Yr Trend	State Avg 2024
Elementary Education	68%	65%	61%	54%	▼	75%
Special Education	63%	60%	58%	56%	▼	72%
Early Childhood	66%	63%	60%	57%	▼	76%
<b>SVCU Overall</b>	<b>71%</b>	<b>68%</b>	<b>65%</b>	<b>61%</b>	<b>▼</b>	<b>74%</b>
<b>STATE AVERAGE</b>	<b>75%</b>	<b>74%</b>	<b>74%</b>	<b>74%</b>	<b>▶</b>	<b>74%</b>

**Data Set 1b: State Licensure Pass Rates by First-Generation Status – Program Completers Submitting the State Performance Assessment (2024 Cohort, n = 32)**

SVCU serves 38% first-generation college students. The table below disaggregates overall pass rates by first-generation status. Candidates of color represent 44% of enrollment; disaggregated data by race/ethnicity is not yet systematically collected at the program level – a gap the QA Working Group has identified as a priority.

Candidate Group	n (2024)	Pass Rate	State Avg	Gap vs. State Avg
Continuing-Generation	12	71%	74%	-3 pts
First-Generation	7	47%	74%	-27 pts*
<b>SVCU Overall</b>	<b>19</b>	<b>61%</b>	<b>74%</b>	<b>-13 pts</b>

\*First-generation candidates pass at a rate of 27 percentage points below continuing-generation peers and 27 percentage points below the state average. This gap is not visible in the aggregate pass rate.

**Data Set 2a: Mean Domain Scores – SVCU Candidates Who Did Not Pass (2024 Cohort, n = 13)**

Scores below 2.0 on any domain trigger mandatory remediation. The minimum passing composite is 2.75.

Program	Task 1 Planning	Task 2 Instruction	Task 3 Assessment	Task 4 Learning Environment	Composite
Elementary Education	2.18	2.31	2.12	<b>1.74*</b>	2.09
Special Education	2.15	2.28	2.08	<b>1.69*</b>	2.05
Early Childhood	2.17	2.30	2.10	<b>1.71*</b>	2.07
<b>SVCU Mean (non-passing)</b>	<b>2.21</b>	<b>2.36</b>	<b>2.14</b>	<b>1.78*</b>	<b>2.12</b>

\*Scores below 2.0 (mandatory remediation threshold) are highlighted. Task 4: Learning Environment shows the most pervasive gap across all programs.

**Data Set 2b: Clinical Observation Ratings – Student Teaching Semester (2024 Cohort, n = 32)**

University supervisors and mentor teachers complete a shared clinical observation rubric during the final student teaching semester. Ratings use a four-point developmental scale: 1 = Emerging, 2 = Developing, 3 = Proficient, 4 = Highly Effective.

Scores below 2.5 indicate candidates may not yet be consistently practice-ready.

Program	Planning	Instruction	Learning Environment	Differentiation	Professionalism	Overall Clinical Mean
Elementary Education	2.78	2.64	<b>2.18*</b>	<b>2.26*</b>	3.12	2.60
Special Education	2.72	2.58	<b>2.11*</b>	<b>2.31*</b>	3.08	2.56
Early Childhood	2.74	2.61	<b>2.16*</b>	<b>2.28*</b>	3.18	2.59
<b>SVCU Clinical Mean</b>	<b>2.75</b>	<b>2.61</b>	<b>2.15*</b>	<b>2.28*</b>	<b>3.13</b>	<b>2.58</b>

\*Clinical performance areas below 2.5 are highlighted. These clinical performance patterns closely mirror weaknesses later identified in district evaluation and employer feedback data.

**Data Set 2c: Candidate Growth Across the Clinical Sequence (2024 Cohort, n = 32)**

The table below reflects mean candidate ratings on the Learning Environment domain across the clinical progression sequence.



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Clinical Experience Stage	Mean Learning Environment Rating
Early Field I	2.04
Early Field II	2.19
Practicum	2.31
Student Teaching — Midpoint	2.42
Student Teaching — Final	2.51

Although candidate scores improve across the clinical sequence, growth slows significantly during student teaching. Candidates approach proficiency by the end of the program but remain below district expectations for independent classroom readiness.

**Data Set 2d: Clinical Supervisor Calibration & Caseload Data (2024 Cohort, n = 32)**

University supervisors participate in annual calibration training intended to improve scoring consistency across placements. Participation is not mandatory.

Supervisor Group	Avg. Caseload	Calibration Participation Rate	Inter-Rater Agreement	Mean Candidate Rating
Full-Time Supervisors	9	100%	91%	2.68
Adjunct Supervisors	16	54%	73%	2.94
Supervisors Without Calibration Participation	18	0%	61%	3.18

Supervisor caseloads and calibration participation vary considerably. Supervisors who did not participate in calibration training assigned substantially higher candidate ratings than calibrated supervisors, raising concerns about scoring consistency and reliability across placements.

**Data Set 3: SVCU Employer Feedback Survey & Completer Exit Survey — Selected Items (2024 Cohort, n = 19)**

Employer survey: n =11 (response rate 58%). Completer exit survey: n = 8 of 19 completers (response rate 42%). Scale: 1 = Strongly Disagree, 4 = Strongly Agree.

Survey Item	Employer Mean	Completer Mean
Graduate/completer demonstrates strong content knowledge	3.21	3.45
Graduate/completer demonstrates effective instructional planning	2.84	3.38
Graduate/completer manages the learning environment effectively	2.41*	3.12
Graduate/completer differentiates instruction for diverse learners	2.38*	3.08
Graduate/completer uses assessment data to inform instruction	2.52	3.19
Graduate/completer demonstrates professionalism and collaboration	3.54	3.61
Graduate/completer was prepared for the realities of classroom practice	2.29*	2.98
I would recommend SVCU graduates to other schools/districts	2.76	n/a
I feel well-prepared for my first year of teaching	n/a	3.21
My preparation program connected theory to practice effectively	n/a	2.87

\*Employer ratings below 2.5 highlighted. Note the consistent gap between how completers rate their own preparation vs. how employers rate their readiness in the same areas.

**Section 7: The Data - Meadowbrook Unified School District**

**Data Set 4: Teacher Evaluation Ratings — Meadowbrook Unified, First- and Second-Year SVCU Graduates**

Meadowbrook uses a four-domain evaluation framework aligned to state teaching standards. Ratings: Unsatisfactory, Developing, Proficient, and Distinguished. Data reflects SVCU graduates employed at Meadowbrook in years 1–3 of teaching (n varies by year: 2022=38, 2023=41, 2024=44).

Year	Competency	Unsatisfactory (%)	Developing (%)	Proficient (%)	Distinguished (%)
2022	Domain 1: Planning & Preparation	8	22	52	18
2023	Domain 1: Planning & Preparation	11	26	48	15
2024	Domain 1: Planning & Preparation	14	30	42	14



Year	Competency	Unsatisfactory (%)	Developing (%)	Proficient (%)	Distinguished (%)
2022	Domain 2: Learning Environment	14	28	43	15
2023	Domain 2: Learning Environment	19	33	36	12
2024	Domain 2: Learning Environment	24*	38	30	8
<b>Domain 3: Instruction</b>					
2022	Domain 3: Instruction	10	24	49	17
2023	Domain 3: Instruction	13	28	44	15
2024	Domain 3: Instruction	17	32	40	11
<b>Domain 4: Professional Responsibilities</b>					
2022	Domain 4: Professional Responsibilities	6	18	55	21
2023	Domain 4: Professional Responsibilities	8	20	53	19
2024	Domain 4: Professional Responsibilities	9	22	51	18

\*Rows with 20%+ Unsatisfactory ratings highlighted. Domain 2: Learning Environment shows the steepest decline across all three years.

Individually, each data source tells only part of the story. Together, they begin to reveal recurring patterns across preparation, clinical practice, and early-career teaching outcomes.

## Section 8: Data Dialogue Protocol

Work through the following steps as a group. Each step builds on the one before. Your goal is not to reach a quick conclusion; it is to practice rigorous, evidence-grounded thinking about what the data mean and what it demands.

### Step 1: Observations – Just the Facts

#### Persona Perspectives: What Do You See Through Your Lens?

Each persona responds to the data from their role.

AC	As the Assessment Coordinator, what patterns across these data sources suggest coherence, or lack of coherence, in SVCU’s assessment system? Which evidence source do you trust most, and where do you see the greatest reliability concern?
DP	As the District Partner, what patterns in these data confirm what Meadowbrook is experiencing in classrooms? Where do you see evidence that SVCU understands the problem, and where do you see evidence that it does not yet know enough to act effectively?
FM	As the Faculty Member, what conclusions can reasonably be drawn from this data — and where do you believe the evidence is incomplete, overinterpreted, or disconnected from the realities of teaching and learning?
MT	As a Mentor Teacher, which findings in these data align most closely with what you observe in real classrooms? Where do formal evaluations and observation scores fail to capture what actually matters in day-to-day teaching practice?
CS	As the Clinical Supervisor, what do the clinical datasets help make visible about candidate development? What critical aspects of clinical practice, placement quality, or supervisor consistency remain invisible in SVCU’s evidence system?
TR	As the Teacher Resident/Candidate Representative, where do these data align — or conflict — with your lived experience in the program? What parts of candidate growth, support, stress, or inconsistency are invisible in SVCU’s evidence system?

Before interpreting or problem-solving, state only what the data shows. Resist the urge to explain, defend, solve, or assign blame. Focus only on what the data shows.



<b>I observe that...</b>
<b>Some patterns and trends I notice...</b>
<b>I can count/calculate...</b>
<b>I see that...</b>

**Step 2: Interpret – 5 Whys**

Select the most important pattern your group identified. Use the 5-Whys protocol to move toward root cause. The goal is to go beyond surface explanations.

Describe the opportunity/challenge:	Consider structural, cultural, relational, and procedural contributors, not just individual performance explanations.
Why might this be happening? Because:	
Why is that? Because:	
Why is that? Because:	
Why is that? Because:	
Why is that? Because:	

Based on your observations and root cause analysis, identify the root cause that warrants the most focused attention in SVCU's QA system.

<b>Area of Focus (Root Cause):</b>
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**Testing Possible Root Causes**

Once you have identified a possible root cause, the next critical step is to test it. A way to test a suspected root cause



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is to ask: *If we fix this, does the problem actually improve?* If there is no expected improvement, then the cause may not be the true driver of the issue, and the team should revisit their interpretation of the data.

**Goal Statement**

Develop a goal statement that is directly grounded in the data you analyzed and interpreted. A strong goal clearly identifies the area for improvement, who or what will improve, and the desired outcome. Focus on the impact you want to achieve rather than the activities that will help you reach the goal.

**Strong Example:**

Improve candidate performance in differentiated instruction by increasing opportunities for practice-based instructional adaptation and feedback during clinical experiences.

**Weak Example:**

Provide more training on differentiated instruction.

<b>Our Goal...</b>
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**Step 3: Action Plan**

Based on your analysis, complete an action plan for SVCU. This plan should reflect your group’s collective recommendations, not just one person’s priorities. Negotiate, prioritize, and commit.

<b>Specific:</b>	What quality challenge is this plan addressing?
<b>Measurable:</b>	What evidence will demonstrate that progress is being made?
<b>Attainable:</b>	Can SVCU reasonably accomplish this in the timeframe given current capacity?
<b>Relevant:</b>	Does this align with the accreditation concerns and district partnership goals?
<b>Time-bound:</b>	What is the end date? What are the 30-, 60-, and 90-day milestones?

**Action Steps**

Action Step	Lead	Evidence of Progress	Timeline	Resources Needed	Status

**Progress Monitoring**



How will your group know if this plan is on track? Who reviews progress? How often? What triggers a course correction?

**Step 5: Reflection**

After implementation, the final step is to close the loop by determining whether the action plan produced the intended impact. Begin by examining implementation evidence to determine whether the plan was carried out as intended. Next, review updated data and compare it to the original baseline to identify any meaningful changes or trends. Then consider whether those changes appear connected to the identified root cause and targeted strategy.

Based on this evidence, determine whether the team should continue the action plan, make adjustments, or revisit the original root cause and strategy. Finally, document key findings, lessons learned, and remaining questions to inform future data dialogue and continuous improvement efforts.

**Reflection Worksheet**

Reflection Worksheet	
<b>1. Action Plan Summary</b>	
What action plan was implemented?	
What root cause was it intended to address?	
<b>2. Implementation Check</b>	
Was the action implemented as intended?	
<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No	
If the action was only partially implemented or not implemented as intended, what factors or barriers impacted implementation?	
<b>3. Outcome Review (Data Comparison)</b>	
Baseline data (before implementation):	
Current data (after implementation):	
What change do you observe?	
<b>4. Root Cause Validation</b>	
Does the observed change align with the expected impact of addressing the root cause?	
<input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No	
What evidence supports your conclusion?	



<b>5. Decision on Next Steps</b>
<input type="checkbox"/> Continue action (effective) <input type="checkbox"/> Adjust action plan (partially effective) <input type="checkbox"/> Revisit root cause and redesign plan (not effective)
Explain your decision:
<b>6. Key Learning</b>
What did we learn from this cycle?
What will we carry forward into future cycles?

**Section 10: Bridge to Your Context**

SVCU's situation is fictional, but its challenges are real. Before leaving the case study behind, take time to make the connection explicit.

- Bridge Moment — Individual Reflection**
1. What in SVCU's story resonates most with challenges in your own EPP or context?
  2. What in SVCU's situation is most different from yours, and what does that difference tell you about what you need?
  3. What is the one recommendation you gave to SVCU that you most need to give yourself?
  4. What is the first concrete action you will take when you return to your institution?