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About the QM Principal Preparation Partnership Self-Assessment: Texas Residency Version

This tool is designed to help Texas school districts and universities understand how to partner effectively in developing and implementing principal residencies. It builds on the Quality Measures Partnership Effectiveness Continuum (PEC), produced in 2014, which provided a broader picture of effective partnerships between districts and universities for multiple purposes. This version incorporates current research on district-provider partnerships for principal preparation, including residencies, and Texas-specific standards.

The tool is organized into five key areas – or dimensions – that are most essential to effective partnerships: partnership vision; shared program leadership; partnership infrastructure; continuous improvement and progress tracking; and partnership sustainability, alignment, and integration. Indicators for each dimension describe partner roles, responsibilities, and practices that contribute to an effective partnership. Each indicator is matched with examples of evidence that may demonstrate that partners have successfully implemented the indicator. These examples are not intended to be exhaustive, and partners engaging in the self-assessment are encouraged to identify additional examples of evidence that are relevant to the indicator in their practice.

Based on the collected evidence, partners should collaboratively determine a rating for each indicator based on the rating scale below. These ratings are meant to guide continuous improvement and not to be evaluative. The indicators are aspirational – not a standard of competence – and meant as guideposts for the ongoing work of strengthening partnerships.

	Rating Scale			
1.	Not Started	Partnership has not yet been attended to in a meaningful way.		
2.	Planning	Partners have evidence of intended steps and/or collaborative thinking but little or no evidence that the indicator is currently practiced.		
3.	Practicing	Partners have evidence that the indicator is inconsistently practiced or partially in place.		
4.	4. Established Partners have evidence that the indicator is consistently practiced or fully in place.			
5.	Institutionalized	Partners have evidence that the indicator is institutionalized.		





QM Rubrics

Dimension 1: Partnership Vision				
	INDICATORS	EXAMPLES OF EVIDENCE		
1a.	Partners have an explicit, shared vision of what an effective principal knows and is able to do, which reflects local community needs and characteristics.	 Principal leadership standards Portrait of a Principal Residency / Prep Program Graduate A shared mission or goal statement 		
1b.	Partners have an explicit, shared vision of the components of an effective principal preparation program.	 TX principal residency guidelines Preparation program standards (e.g., QM) Residency program design (collaboratively created) 		
1c.	Partners have an explicit, shared understanding of the purpose and value of their collaboration.	 Partnership mission statement Partnership team charter Partnership agreement / Memorandum of Understanding (MOU) 		
1d.	Partners articulate clear, measurable goals and establish metrics for measuring progress.	 Progress report Annual report Grant application 		





Dimension 2: Shared Program Leadership		
INDICATORS		EXAMPLES OF EVIDENCE
2a.	Partners co-develop recruitment priorities and plans and jointly participate in recruitment.	 Recruitment priorities Recruitment plan Materials from recruitment events Evidence of partner participation at recruitment events
2b.	Partners collaboratively develop program selection criteria and jointly participate in candidate selection.	 Selection criteria/rubric Agenda or meeting notes from candidate selection process
2c.	Partners collaborate on the design and delivery of coursework.	 Course sequence and syllabi Course assignments Agendas or minutes from course design meetings District-based adjunct faculty
2d.	Partners co-design the clinical experience and collaborate on the support of principal candidates.	 Descriptions of activities in the clinical experience Work samples from the clinical experience Communications or meeting minutes between university and district-based principal candidate supervisors (sometimes called clinical coordinator, mentor, coach, facilitator) to coordinate support
2e.	Partners regularly communicate about candidate progress and support.	 "Triad" meeting agendas (candidate, faculty member, clinical supervisor, or coach) Protocols for joint review of candidate progress Candidate feedback protocols





Dimension 3: Partnership Infrastructure			
INDICATORS		EXAMPLES OF EVIDENCE	
За.	Partners have clear processes for shared decision making that include ample input from each partner organization.	 Memorandum of Understanding (MOU) Decision-making protocol Guidelines for how faculty and district staff contribute to decisions about candidate selection, placement, course design, etc. 	
3b.	Partners regularly communicate through defined structures and routines.	 Meeting schedules Meeting minutes Project plans or timelines Informal communication channels (e.g., Slack, texting, email) Protocols for communication 	
3с.	Partners have clearly defined roles and responsibilities.	MOUAnnual work planGrant application	
3d.	Partners have systems, structures, and routines to support collaboration.	 Regular meeting times Shared folder system (e.g., Google drive) Meeting minutes/notes Protocols for reviewing program artifacts or candidate work samples 	
3e.	Partners have sufficient resources (financial, time, and staffing) to lead and manage the program.	 Budget statements Staff rosters Work plan with staff assignments 	





Dimension 4: Continuous Improvement and Progress Tracking			
INDICATORS		EXAMPLES OF EVIDENCE	
4a.	Partners have created the infrastructure for collecting and sharing data relevant to the partnership.	 Data sharing agreement Schedule for data collection and analysis A shared data management system Protocols for sharing candidate work Leadership tracking system 	
4b.	Partners regularly engage in collaborative data analysis related to district needs, program quality, candidate progress, and the success of graduates in the field.	 Meeting agendas/minutes that include data analysis time Protocols for collaborative data analysis Datasets and/or findings 	
4c.	Partners apply findings from data for continuous improvement.	Action plans based on data analyses	





Dimension 5: Partnership Sustainability, Alignment, and Integration			
	INDICATORS	EXAMPLES OF EVIDENCE	
5a.	Partners have an articulated transition plan for role turnover.	 Procedures or protocols for onboarding new staff Documentation of partnership information (e.g., contact lists, meeting schedules, past meeting notes) Job descriptions, including lists of responsibilities for role 	
5b.	Partners have adequate funding to sustain the partnership's needs.	 Budget documents that reflect funding and/or in-kind support MOU 	
5c.	Partners engage institutional leaders to support partnership goals and sustainability.	 Meeting minutes Communication from institutional leaders Institutional publications that indicate support for residency 	
5d.	Partners update and maintain a shared partnership vision to reflect current local community needs.	Partnership vision statementMOU	
5e.	Partners align the residency content with in-service professional development for school leaders and district performance evaluation to ensure a consistent leadership vision across the developmental continuum.	 Curricula linking content along the leadership continuum Training materials for principal supervisors 	





