The Community Learning and Resource Center (CLRC) aligns with the Woodring College of Education’s vision and mission. The center will provide a means of “preparing thoughtful, knowledgeable, and effective educators for a diverse society.” It also is consistent with the mission of social justice, embracing diversity, and fostering community membership. It will provide services that are often beyond the economic reach of families with children from diverse populations.

The following is a brief narrative discussing what has been accomplished up to this point according to the timeline. A further purpose is to note challenges and possible next steps.

A. What has been accomplished:

*Timeline of activities*

1. **By May 2012 - Investigate other learning centers across the western states for possible operational options**

We investigated learning centers across the United States. While there are numerous academic clinics with a variety of focus and structure associated with universities, we chose models that most closely aligned with our conceptualization. The ones that were most similar are the following: (a) University of Georgia, (b) University of Utah, and (c) University of Oregon. We investigated their operating structure, philosophy, methods of assessment, and community outreach.

2. **By April 2012 – Solicit community partners**

We have engaged in some preliminary conversations with the YMCA to assess community interest. But a structure needs to be formalized before taking further steps.

3. **By April 2012 - Investigate space for the clinic and parking**

Pam Hamilton and I met with those responsible for parking. We investigated options of either designated/reserved parking spaces or parking passes for parent use. This continues to be a concern because parking is so limited in the vicinity of Miller Hall. Parking authorities determined that parents would need to park at meters situated at various locations. This is problematic because families who use our services are likely to be low-income and not have the funds for parking. This continues to be a solution in the making. Space for the clinic is to be investigated after organization of the clinic is formalized.

4. **By June 2012 – Determine operating procedures, guidelines, system for accountability. Write operational plan.**
We are in the process of completing an operating manual that includes procedures for the clinic. We have completed the tutor handbook and a parent handbook. We have completed in-take documents (e.g., parent contracts, parent information forms, and forms for clinic supervisors that specifies assessment results, in-take information, tracking of attendance and goals and objectives for students, and progress in instruction).

We field tested in-take materials and processes and revised according to problems identified. During, Summer 2012, I supervised one Western SPED student who taught two children with reading disabilities. Fall 2012, I taught and supervised three Western students as a try out. I taught a variety of reading assessments used commonly in academic clinics and then supervised instruction. The Western students taught four children with disabilities. We sought feedback from families in order to refine the processes. We sought feedback from the Western students as to ease of use of assessment and data collection instruments. In addition, we identified various situations that could be problematic if not addressed proactively. We used the feedback to revise processes and materials.

Pam Hamilton and I met with representatives from Western’s Speech and Hearing Clinic in order to understand fee structures and the process for requesting fees for service. We have developed a fee schedule based upon income. The purpose of the fees, along with possible donations, is to provide funding for the clinic (e.g., staff and materials). A further purpose is to provide families accountability for services. We will need vet fee structure further and set up accounts according to university policy.

5. By June 2012 - Organize roles for partners

Our nest step will be approach members of the College of Education to see if and how they would like to be involved.

6. By July 2012 - Determine and order necessary materials, including software

We have acquired a substantial amount of reading materials through donations from various publishers and individuals. The reading materials have been inventoried into a database. A checkout system has been established with priority to practicum and clinic staff.

7. By August 2012 - Design handouts and flyers

This is to be done at a later date.

8. By September 2012 - Hire and orient graduate student

We are not a point to hire a graduate student.
B. Challenges to be met

If we continue with the idea of Center, outside funding in the form of donations or fees as well as allocation of College resources (e.g., space) will be required. We will need to investigate which university committees will need to review and approve plans. Other options need to be explored for operations that may simplify this process.

College partners and the roles they would like to play in the clinic need to be established. Some of the possible partners in the College are the following: EATRC, America Reads, Compass to Campus, TESOL, and Elementary Education. How might this clinic be a resource for instruction and practice in their programs.

Questions regarding tutors still need to be answered.
   1. Who will be the tutors
   2. How will tutors be trained
   3. Who will supervise tutors

Possible solutions are partnerships with America Reads, practicum students, master students, Compass to Campus. Another possibility is a separate class that students take in order to further their practicum experiences while working with individual students or small groups.

Space and parking continue to be a problem to be solved.