

better, both in terms of the substantive quality of its programs and its image and prestige in both academic and professional circles. University administrators want the same thing, but, like it or not, the mission of training bright, young law students to be competent and ethical practitioners is only part, and at best a secondary part, of the university's broader mission to create and advance knowledge. Expectations of the relationship with and support from the central university have to be established in this context and then communicated effectively to the law school community.

So the author's advice to new deans is do not view your role as that of gladiator for the law school; the body on the floor of the Coliseum is most likely to be your own. Demagogery may play well in the dean search interview with faculty already inclined to feel under-appreciated and devalued, but you are only sowing the seeds for your future undoing. For sitting deans, it is not only important to inculcate a sensitive understanding of and appreciation for the broader role of the university as a whole, but also to publicly support it. In sum, be mindful of what you say about central administration except to a very, very small and trusted group of advisers, and remember that faithfulness to your institution sometimes means you have to sleep with the enemy.

CLINICAL LEGAL EDUCATION

Evaluating clinical law teaching — suggestions for law professors who have never used the clinical teaching method

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It is important to understand the goals of clinical teaching and to recognise that clinical teaching might look different from other law school teaching. A promotion or tenure review

committee cannot use the same language, concepts or benchmarks when assessing clinical teaching as it uses in assessing many doctrinal courses. While the overall goal of assisting a law student in becoming a better legal thinker, planner and practitioner is the same, the specific teaching goals of each type of course can be quite different. This assumption should not go unexamined. Experienced professors should take the time to question and understand the value of new approaches. Unfortunately, there are few good models for evaluating law teaching generally.

All clinical teaching involves some form of experiential learning that can be described in a three-step process: 1) the student learns to formulate an action plan; 2) the student enacts that plan through a structured experience; and 3) the student reflects about the experience and modifies future action accordingly. The clinical process is thus a blueprint for professional growth. While not all clinical law professors use the same terms in describing what they do, most clinical law experiences are structured to take advantage of experiential learning and employ a variety of teaching methods.

Every clinical law professor requires students to engage in some type of planning process. Plans are developed by combining lawyering theories, practical information, and legal research. Clinical teachers have different approaches to the role of theory in the development of professional skills and values. Some clinicians assign materials that describe a particular theory of the skill or value early in the course and then require the students to emulate that theory. Typically, clinicians will require students to develop plans for some or all of the following skills: interviewing clients and/or witnesses, counselling clients, drafting pleadings, engaging in negotiation or mediation, preparing for a trial or hearing or developing alternative solutions to help the client.

The focus of the planning will reflect the focus of the course. There are several methods to help students develop action plans. For example, some clinicians favour checklists, forms or protocols to ensure their students learn to think through the same issues in every case. The choice of approach is less important than the planning which is fostered, although the approach used should match the professor's teaching philosophy.

In any clinical course, the catalyst for learning is the experience component. Clinical professors make many choices when designing the experience component of the course. The experiences offered should allow the students to practise the skills or apply the values that are the focus of the course. While students will practise many skills and apply values that are peripheral to the focus skills and values, priority should be given to those experiences that are most likely to offer the student the opportunity to practise the focus skills and values. Whatever the focus, students should be required to experience challenging professional situations that require decision-making and the exercise of judgment.

The third step to good experiential learning is reflection upon the experience. Most clinical educators consider the reflection stage to provide the major source of learning. The professor should guide the student through a process of thinking about how well the action plan succeeded. The process demands that students integrate the theory, the experience and real-life events to learn how to build upon strengths and improve upon weaknesses. It is through reflection that clinical teachers instil a lifelong habit of professional self-development and growth.

Faculty who do not teach in clinics fail to understand some of the extrinsic demands of the clinical teacher. The traditional separation of teaching, service and scholarship as an evaluation device is often not a helpful construct when evaluating a clinical educator.

Untenured faculty members are counselled to limit their service activities to gain more time to work on scholarship and teaching. Such advice is not useful for most clinical law teachers. While other law professors might choose to practise law, the clinical law professor practises law as a requirement of the position. The clinician is a member of the bar with special duties that arise because of clinical teaching. These special duties arise from the reciprocation of the clinician's need to keep up with developments in law practice specialties and the profession's need for input gleaned from the experiences of clinical law professors.

Traditional methods for reviewing faculty may not work when reviewing clinical teachers. Unlike a classroom teacher whose contact with students consists of written materials, class discussion or lecture, and perhaps e-mail exchanges, the live-client clinical faculty member and the extern supervisor may interact with students on a daily basis by teaching and advising. Most of clinical teaching takes place outside the classroom. Moreover, the classroom is often used as a place to allow students to offer advice to each other, to raise issues or problems, or to perform exercises, small group workshops or case rounds. The classroom component is used to accomplish different objectives for the clinical teacher and is less likely to involve significant presentations by faculty. Thus, observation of classroom activities is a woefully inadequate way to evaluate most clinical teaching. The problem then becomes, how does a faculty evaluate clinical supervision?

While clinical professors share many common goals, there are many differences in style, approach, subject matter, and method. These differences should be welcomed. In fact, many clinical professors continue to vary their own teaching styles depending upon their interests and needs and those of their students. It is important for

those reviewing clinical teaching to understand the methods used by clinical teachers and to embrace a wide range of different approaches, while helping those professors achieve a high level of teaching quality.

The divorce case: supervisory teaching and learning in clinical legal education

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This article explores what and how law students learn in clinical legal education. More specifically, it examines the experiences of students handling divorce cases in the clinic and how those experiences contribute to the learning process. The article is based in part on the author's experience of teaching and learning during 1998 at Cornell University's Legal Aid Clinic. The article began as a description of clinical supervision and other clinical teaching processes; it was intended to help newer clinicians and clinical programs in thinking through their educational goals and methods. It has become a broader reflection on law teaching and how clinical methods can contribute to more effective teaching generally.

Clinical education offers teaching approaches that can work well throughout the law school curriculum. Using clinical processes, law teachers can encourage students to examine their roles as lawyers, to wrestle with issues of professional responsibility that they will face in practice and to become reflective lawyers. Clinical teaching methods provide law students with a rich learning experience. This fact should be considered as law teachers design their courses.

Since clinical training is not required in most law schools, many, if not most, law students complete their legal education without the kind of supervised practice experience that the clinic provides. Students who do not take a clinic course also miss out

on the opportunity to work closely with a faculty mentor and to reflect upon the role that attorneys play in the legal process.

Clinical legal education refers to that part of the law school curriculum, which provides students with experiential training where students learn by doing. Clinic courses are designed using a variety of educational models, including externships, where students observe and experience the practice of law by working in offices of legal services programs, prosecutors, judges, or other legal services providers; simulations, where students practise client interviewing, counselling, negotiation, trial advocacy, and other lawyering skills using structured problems in a supervised setting; and the 'live-client' or 'in-house' clinic, where students function as attorneys representing real clients. Many clinic models include a classroom component taught by full-time law school faculty or adjuncts.

The place that clinical education holds in the curricula of modern law schools has been justified based on important substantive training that it offers to law students, such as training in lawyering skills. In addition, and probably more importantly, clinical education as a method of teaching may be even more valuable than the substantive material taught. The clinic experience is intended to expose students to the practice of law. The clinic gives students experiences in three broad areas: (1) students learn and practise a set of lawyering skills; (2) they learn the basics of working with clients and being advocates; and (3) they are exposed to a variety of professional ethics issues and issues relating to their role as lawyers.

An even more basic goal of the clinic is to provide students with an experience of legal education that is in some ways fundamentally different from the 'traditional' legal education they have had up to this point in law school. In the clinic students are