

# Effectiveness of Clinical Supervision in Improving Learning Quality: A Comparative Study at Al Falah Assalam Junior High School Sidoarjo and Bilingual Integrated Junior High School Krian Sidoarjo

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**Abstract**— This research aims to describe and analyze data regarding the effectiveness of clinical supervision in improving learning quality, through a comparative study at Al Falah Assalam Junior High School Sidoarjo and Bilingual Integrated Junior High School Krian Sidoarjo. This study uses a qualitative approach with a multiple case study design. Data collection techniques in this study were participant observation, in-depth interviews, and documentation studies. The results of the study indicate that clinical supervision is a series of processes to help teachers improve their teaching behavior and improve the quality of learning in the classroom on the teacher's own initiative and is carried out through the stages of planning meetings, class observations, and feedback meetings. The behavior of the principal and teachers in building collegial relationships in the implementation of clinical supervision is reflected in collaborative interactions, open communication both in formal and informal discussions, mutual trust, and sharing of knowledge and skills between teachers. The approaches used by the principal in conducting clinical supervision are the indirect interpersonal approach (nondirective interpersonal approach) and the collaborative interpersonal approach (collaborative interpersonal approach). Clinical supervision is able to change teacher teaching behavior to be better and is very effective in improving the quality of teacher learning in the classroom. This is indicated by the change in the FC teacher's score, which increased from 56.25 before clinical supervision to 96.88 after clinical supervision. Meanwhile, the DA teacher's score increased from 57.14 before clinical supervision to 100 after clinical supervision.

**Keywords**— implementation of clinical supervision, improving the quality of learning

## I. INTRODUCTION

Clinical Supervision is an important part of learning supervision that is often forgotten, not carried out by educational units. In fact, clinical supervision is an inseparable part of educational management, especially in improving the quality of teaching and learning of teachers in the classroom. It is not enough to just supervise learning, to improve the quality of teacher learning in the classroom, it takes continuous efforts by teachers and school leaders collaboratively to improve the quality of learning through clinical supervision.

In the book "Clinical Supervision", Cogan (1973) as one of the initiators of the term and concept of clinical supervision explains that teachers need a program of expertise and sustainability to help them let go of their old teaching behaviors and replace them with new behaviors, namely a program that has the power to help them apply several new competencies to specific conditions that will benefit each child, each class and the teacher themselves. This program focuses on supervision in the classroom and this program is called clinical supervision.

Schools are non-profit educational institutions, however, schools are expected to continue to improve the quality of their educational processes and outputs. Quality must be the main priority in organizing education in schools because the sacred duty of schools is to help educate the nation and improve the quality of Indonesian human resources. Following up on efforts to improve the quality of human resources, the Ministry of Education and Culture of the Republic of Indonesia has launched a reform of the Indonesian education system through the Merdeka Belajar policy.

Education is truly aimed at liberating the minds, body and soul of students. Therefore, through the Merdeka Belajar policy, the Ministry of Education and Culture creates a land for creativity to grow and develop in students, educators and education personnel. The Merdeka Belajar policy gives each educational unit the freedom to innovate by adjusting the conditions in which the teaching and learning process takes place, both in terms of culture, local wisdom, socio-economics and infrastructure. The essence of Merdeka Belajar is to explore the greatest potential of school teachers and students to innovate and improve the quality of learning independently.

Supervision at Krian Integrated Bilingual Middle School is unique, for teachers who get the best learning supervision scores, they will get rewards in the form of goods such as bags or watches. The purpose of giving rewards is to motivate teachers to carry out effective and enjoyable learning activities in the classroom to improve the quality of learning. The principal also carries out clinical supervision as a follow-up to teachers who need help to improve learning in the classroom. The implementation of clinical supervision at Krian Integrated Bilingual Middle School, Sidoarjo also comes from requests from teachers or the principal can also propose to teachers who have certain weaknesses in the learning process to be clinically supervised, but still with the approval of the teacher. Clinical supervision at Al Falah Assalam Middle School, Sidoarjo is carried out through the following three stages: 1) initial meeting, where teachers who have weaknesses in certain teaching skills apply for clinical supervision, at this meeting, the principal and teacher discuss the teaching problems to be supervised and jointly design learning plans; 2) observation, where the principal observes teachers who are carrying out Teaching and Learning Activities (KBM) in the classroom using instruments and recording the teacher's learning

activities; and 3) feedback and Follow-up Action Plan (RTL), where the principal and teacher watch the teacher's learning video together and then analyze the observation results collaboratively and design learning plans for the next cycle if necessary.

SMP Al Falah Assalam Sidoarjo and SMP Bilingual Terpadu Krian, Sidoarjo have several important similarities, namely 1) the existence of supervisory competence possessed by the principal. The principal is able to carry out his responsibilities as a learning supervisor well, this is reflected in the implementation of supervision carried out in a humanistic manner, providing opportunities for teachers to conduct self-evaluations and determine alternative solutions to their learning problems and helping teachers find solutions to overcome learning problems. The principal is able to understand the needs of teachers for quality learning and is able to facilitate teachers in implementing and developing quality learning. The principals in both schools are considered by researchers to have knowledge of instructional leadership and adequate supervisory competence, 2) originating from the initiative of teachers who have certain weaknesses in the learning process and have the motivation to improve them, so that the teacher volunteered to be supervised clinically, 3) the implementation of clinical supervision is very effective so that it can improve the quality of learning, this is evidenced by changes in teacher teaching behavior that have increased after being supervised clinically, and 4) teacher competence, both professional competence and pedagogical competence, is quite proud in both schools. The difference in clinical supervision in the two schools is that at the feedback meeting or final meeting, the principal of SMP Al Falah Assalam Sidoarjo uses video media to analyze the results of classroom observations collaboratively with teachers, while the principal of SMP Bilingual Terpadu Krian, Sidoarjo with limited facilities and infrastructure at the school still uses descriptive notes made during classroom observations as data to conduct collaborative analysis with teachers. The principal of SMP Bilingual Terpadu Krian, Sidoarjo also gives rewards or awards to teachers who are able to improve the quality of their learning after being clinically supervised, the awards are in the form of goods. The purpose of giving this award is to motivate teachers to always be creative in developing the learning process and improving the quality of learning in the classroom. The professional and pedagogical competence of teachers will contribute to the quality of learning. Quality teachers will encourage student achievement so that in the end it will lead to the school's academic achievement.

## II. LITERATURE REVIEW

### Clinical Supervision

The term clinical supervision was first coined by Cogan (1973) who said that teachers need a program of expertise and continuity to help them replace their old behavior in the classroom with new behavior, namely a program that is strong enough to help teachers apply some new competencies to specific conditions that are beneficial to each child, each class and beneficial to the teacher themselves. This program focuses on supervision in the classroom and this program is called clinical supervision. In addition, Cogan and Goldhammer in Acheson and Gall (1983) that the term clinical is intended to indicate a face-to-face relationship between teachers and supervisors in an intimate professional relationship and focuses on teacher behavior in the classroom.

Sergiovanni (2006) stated that clinical supervision focuses on teacher problems, is centered in the classroom, is carried out directly and collaboratively between supervisors and teachers and aims to help teachers understand and improve their teaching behavior. Experts believe that clinical supervision can accelerate the level of teacher learning and significantly improve teaching and learning in schools. Clinical supervision is time-consuming and requires a lot of effort to do well under the school bureaucratic pattern. However, supervisors and teachers who are serious about improving their schools will find clinical supervision to be a powerful strategy worth trying. On the other hand, Gregorio (Suhardan, 2010) said that "no school system or educational program is better than the quality of the teaching personnel who compose it". In this case, the term teaching personnel refers to those who are tasked with handling learning, namely teachers.

Teachers play an important role in determining the quality of learning in an educational institution called a school. Whether the quality is getting better or even vice versa. Teachers are the most important component in the learning process of students. The learning process that is easily absorbed by students is produced by teachers who have the ability to transfer the curriculum into learning. The level of quality of teachers' abilities in teaching students is what causes the high quality of learning, which has an impact on the high quality of educational institutions in schools (Suhardan, 2010). The Research and Development Agency of the Ministry of Education and Culture conducted a study that found that many teachers have great potential to develop, but their abilities are simply lost and cannot be utilized by schools or other teachers because they do not know how to utilize them.

Some specific objectives of clinical supervision are to provide feedback on the learning process that has been carried out by the teacher, with an emphasis on the formation of awareness and self-confidence and mastery of the basic teaching skills needed. Furthermore, identifying problems that arise in the learning process and helping to solve these problems. Finally, providing assistance to teachers to be skilled in implementing various learning strategies. Fourth, providing assistance to teachers so that their careers and professionalism develop independently and sustainably. Suhardan (2010) has almost the same opinion as Daryanto & Rachmawati, that supervision of quality improvement is an activity to embody the ideas and desires of teachers on a voluntary basis without coercion. The principal only needs to provide an opportunity. Teachers will be responsible because their ideas have a good place in the school. Teachers teach have adjusted to the applicable school policies and curriculum, only carried out according to the teacher's perception and the condition of their children. Supervision is not an effective way to improve teacher teaching behavior, instead they become reluctant when supervised to find their mistakes. Awareness of improving teaching quality begins with the teacher's awareness after seeing the learning conditions of students who require different or new methods in teaching.

### Principal and Teacher Behavior in Building Collegial Relationships

The aspect of the school context that influences effective supervision and supports the success of the learning process is the organizational climate. Teacher performance in schools is largely determined by the atmosphere or climate in which they work. According to Susanto (2016), an organization when associated with the school organizational climate is an atmosphere in an organization created by the prevailing patterns of interpersonal relationships.

Hoy and Forsyth explain that climate is a broad concept that refers to teachers' perceptions of the work environment in schools, which are influenced by formal organizations, informal organizations, and leadership practices in schools. Thus, organizational climate is a general synthetic concept that is directly influenced by the principal and supervisor, which in turn influences teacher motivation and behavior.

The principal as the implementer of clinical supervision needs to clearly understand the direction and focus of clinical supervision. The focus of clinical supervision is to improve the way teachers carry out teaching by applying more interactive learning models and

strategies so that students can learn productively and what needs to be understood is not to change the teacher's personality. In addition, the focus of clinical supervision on teaching problems includes certain skills that are within the intellectual reach and have the potential to change. The results of clinical supervision practices with clear direction and focus are then analyzed constructively and reinforcement is given to successful behavioral patterns and avoiding criticizing or punishing patterns or behaviors that have not been successful. Clinical supervision activities are based on observation results, not on decisions/assessments that are not supported by real data in the field. School supervisors need to clearly understand that the purpose of teaching for teachers is to provide quality learning services, if supervisors have this understanding then the implementation of clinical supervision becomes more focused. Achieving this focus also requires school supervisors to instill awareness and self-confidence (self-concerns) in themselves and in their supervised teachers. If the supervisor and teacher have asked questions about themselves, both those related to the teacher's own aspects and those related to their students, then a number of alternative solutions are determined. Then the supervisor and teacher make an agreement to carry out supervision using a clinical approach to improve the way teachers teach.

Cogan (1973) stated that the appropriate domain for clinical supervisors is teacher behavior in the classroom, emphasizing events that occur in the classroom rather than trying to change a teacher's personality, attitudes, beliefs, needs, and values. To facilitate such change, clinical supervisors must establish a working relationship and supervisory process that will enable teachers to share equal responsibility for designing the change. The goals of this partnership will not be achieved unless teachers a) understand why they need to change their behavior, b) have the desire to change it, and c) derive professional satisfaction from the change. Cogan describes the types of relationships between teachers and supervisors and their implications for supervision. First, the superior-subordinate relationship. Goethals (Cogan, 1973) observed that in education, supervision is usually formulated as an effort by superiors to help subordinates. This concept is clearly stated in the form of actions and words. Teachers are considered to have lower competence and need direction from the supervisor. As a consequence, teachers are pressured into certain assumptions that have the potential to damage the teacher's own attitude. This kind of relationship will erode the teacher's sense of professionalism and is likely to be damaged by power. This superior-subordinate relationship is a counterproductive relationship in clinical supervision.

Supervisor behavior is very important in determining success in helping to develop teachers in the clinical supervision process. Supervisor behavior as a supervisory approach will contribute to decision-making in planning meetings or feedback meetings. According to Glickman (2014), supervisor behavior in teaching supervision includes: a) listening, b) clarifying, c) encouraging, d) presenting, e) reflecting, f) solving problems, g) negotiating, h) directing, i) standardizing, and j) providing reinforcement. Some supervisory behaviors place more responsibility on the supervisor to make decisions, others will place the supervisee as the party who is more responsible for making decisions, and on the other hand indicate a division of responsibility in making decisions. The categories of teaching supervisor behavior lie along the following continuum, which reflects the scale of control or power.

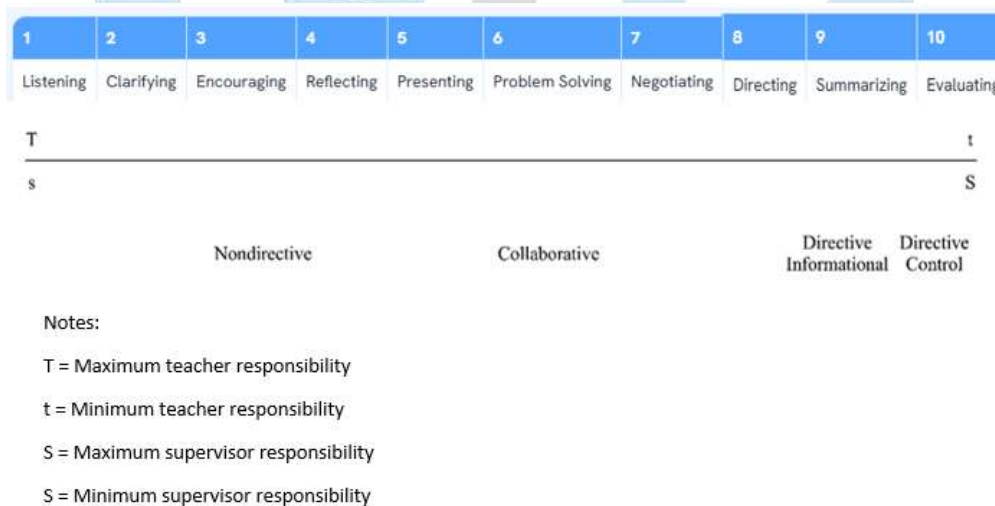


Figure 1. Supervisor Behavior Continuum

The further to the left, the supervisor's (s) responsibility decreases, the supervisor listens to the teacher, clarifies what the teacher says, encourages the teacher to express more about the problem, and reflects through verification of the teacher's perception, and the teacher's (T) responsibility increases. The teacher has high control and power to make his own decisions. This supervisory behavior is called a nondirective interpersonal approach. In the middle, such as presenting ideas, solving problems by asking for advice, and negotiating to determine the right action, the supervisor and teacher have the same or equal responsibility. This supervisory behavior is called a collaborative interpersonal approach.

The further to the right, the supervisor (S) has increasing responsibility, where the supervisor directs the teacher to make alternative actions, the teacher chooses, and the supervisor standardizes the time and criteria for the expected results, in this case the supervisor is the main source of information, while the teacher (t) has decreasing responsibility. This supervisory behavior is a directive informational interpersonal approach. When the supervisor directs what the teacher should do, standardizes the time and criteria of the expected results, and reinforces the consequences of the action then the supervisor is responsible for making decisions, then the supervisor is the party that determines the action, and the teacher is the party that follows. Such supervisory behavior is called the directive control interpersonal approach. Acheson and Gall (1987) revealed that the effectiveness of clinical supervision is one of the important aspects of clinical supervision. The effectiveness of clinical supervision is determined by two things, namely the perception of the principal and teacher regarding the implementation of clinical supervision and the impact of clinical supervision on effective teaching.



Teachers base their perceptions of instructional leadership on the principal's personality and professional characteristics. The principal must provide an example of a love of learning and "walk the talk" in other words, to create a positive learning environment. Teachers emphasize the importance of the principal having all aspects of the school's professionalism. The principal should provide support to teachers so that teachers are able to do their jobs as well as possible. Teachers also mentioned the importance of colleagues or peer support and the central government supporting their principals so that the principal can function effectively. The impact of instructional leadership on schools will result in all staff working collaboratively to improve student achievement. Teachers also agree that supervision is carried out to evaluate teacher teaching performance, but the expectation is that the supervisor, in this case the principal, must have the ability to supervise so that he can provide appropriate direction to teachers in improving the quality of learning (Poirier, 2009). In addition, the principal's competence in carrying out clinical supervision techniques is the greatest source of teacher trust and respect.

### III. METHOD

This study focuses on the effective of clinical supervision aimed at improving the quality of learning. To understand how clinical supervision is implemented to improve the quality of learning, how teachers and principals behave in building collegial relationships and how effective the implementation of clinical supervision is, in-depth observation is needed in natural and reasonable situations, so that a qualitative approach is an appropriate approach for this study. This study was designed using a multi-case study, which aims to describe descriptively and holistically the existence of two Junior High Schools that have implemented clinical supervision to improve the quality of learning. These two schools have different characteristics, starting from the status of the school (Islamic private schools and Islamic private schools based on modern Islamic boarding schools), student conditions (input and output), and the geographical location of the school. The object of research in this study is SMP Bilingual Terpadu Krian and SMP Al Falah Assalam Sidoarjo. The informants of this study are the Principal, Teachers, and students. As well as other supporting documents in the form of photos, activity reports, products, and direct observations.

The data collection technique in this study uses three data collection techniques, namely participant observation, in-depth interviews, and study of documents. Moleong (2007) stated that a qualitative approach is carried out to understand what has been experienced holistically in the research subject which includes observation, interviews, and documentation. The data analysis technique in this study uses descriptive analysis techniques with more descriptions and interview results and documentation studies of the data that have been obtained will be analyzed qualitatively and described in descriptive form so that data related to the implementation of clinical supervision to improve the quality of learning is obtained. The analysis used is Huberman and Saldana (2014) there are three qualitative data analysis techniques, namely data condensation, data presentation, and drawing conclusions.

### IV. RESULTS AND DISCUSSION

#### Clinical Supervision Implementation Process

Acheson and Gall (1983) define clinical supervision as assistance given to teachers to improve their teaching performance, and in the process the teacher participates with their supervisor, so that clinical supervision is emphasized on teacher professional development. According to Acheson and Gall, the use of the term clinical has pathological connotations, so it should not be used in the teacher supervision model. Sergiovanni (2006) stated that clinical supervision focuses on teacher problems, is centered in the classroom, is carried out directly and collaboratively between the supervisor and the teacher and aims to help teachers understand and improve their teaching behavior.

The findings in the field showed that the implementation of clinical supervision carried out at SMP Al Falah Assalam Sidoarjo was initiated by a teacher who was aware of the learning problems carried out in his class, resulting in uninteresting learning and suboptimal student enthusiasm. Realizing this, the teacher then asked for help from the principal to improve his teaching behavior through clinical supervision. This is in line with the theory put forward by Glickman (2013) that clinical supervision must be based on data obtained from the teacher's class which shows the need for assistance from the principal in order to create quality learning. Meanwhile, the findings in the field show that the implementation of clinical supervision carried out at Krian Integrated Bilingual Middle School is based on the results of the principal's and teacher's evaluation of the teacher's academic supervision results which are less than satisfactory and the teacher has the intention to improve his teaching behavior through clinical supervision by the principal. Although this is not in line with Glickman's theory, Pidarta (2009) has another opinion that teachers who are clinically reviewed are teachers who have very low teaching conditions or abilities based on the results of observations (supervision) by the principal. In addition, Makawimbang (2013) also has another opinion that clinical supervision, apart from being initiated by the teacher who is responsible for his learning, can also be carried out on prospective teachers or new teachers at the school to improve their teaching skills to be better. Daryanto & Rachmawati (2015) also have a different opinion that those who receive this clinical supervision are certain people, not all teachers, based on the request or needs of the teacher concerned or at the request of the principal with the consent and willingness of the teacher concerned.

Based on findings in the field and the opinions of experts, this clinical supervision can be applied to 1) prospective teachers, 2) teachers who have difficulties in learning and of their own accord ask for help from the principal through clinical supervision, and 3) teachers who have difficulties in learning and at the request of the principal with the consent and willingness of the teacher concerned to undergo clinical supervision. According to Acheson and Gall (1987), the clinical supervision process is carried out through three stages, namely 1) planning meetings, 2) implementation of observations, and 3) feedback meetings.

The findings in the field show that the process of implementing clinical supervision carried out at SMP Al Falah Assalam Sidoarjo and SMP Bilingual Terpadu Krian consists of three stages, namely 1) planning meetings, 2) implementation of observations, and 3) feedback meetings. This process is also widely used in research (Padhila (2014), Humairoh et al. (2016), Fteiha and Abdawi (2017), Salma et al. (2018), Ghavifekr et al. (2019), Williams et al. (2019), Bello & Olaer (2020), Massiah & James (2020)). According to Humairoh et al. (2016), this stage is more concise and also effective in improving the quality of teacher learning in the classroom.

### ***Principal and Teacher Behavior in Building Collegial Relationships in the Implementation of Clinical Supervision***

Building good relationships is the key to the success of implementing clinical supervision, because there is an agreement and joint commitment to improve self-capacity in teaching. This good relationship will make communication smooth and its implementation is carried out according to the agreed time. A good relationship will also build a commitment that the teaching carried out must be at a high quality standard, this is intended to provide learning services to students with high quality as well (Sagala, 2010).

Findings in the field show that the pattern of relationships that occur between the principal as a supervisor and teachers in the implementation of clinical supervision at Al Falah Assalam Middle School and Integrated Bilingual Middle School is a colleague relationship. Where the principal views teachers as colleagues who need to be helped to improve their teaching behavior. Likewise, the principal treats senior and junior teachers differently but still builds equality. This relationship focuses on peer or collegial relationships, not superior and subordinate. Likewise, teachers view the principal as a colleague who has supervisory competence beyond themselves and is always sincere in helping teachers solve their problems in learning. Both collaborate in planning to take appropriate action. This is in line with the opinion of Daryanto and Rachmawati (2015) that clinical supervision can take place if teachers and supervisors have a good collegial relationship. If these requirements are not met, teachers who face various problems in learning will be reluctant to submit themselves to the supervisor to be clinically supervised. Prianda and Setiana (2013) added that the relationship between the principal and teachers is a partnership that helps and complements each other. The principal is a supervisor who has diverse experiences that can help teachers who still need direction and have minimal experience.

Field findings show that in the implementation of clinical supervision at SMP Al Falah Assalam Sidoarjo, the principal did not provide much direction to the supervised teachers because the teachers had been able to plan strategies to improve learning in the classroom. According to Glickman (2014), the supervisory behavior carried out by the principal of SMP Al Falah Assalam Sidoarjo is called an indirect interpersonal approach (nondirective interpersonal approach). This approach can be seen in Figure 2.2, the further to the left the supervisor's responsibility (s) decreases, the supervisor listens to the teacher, clarifies what the teacher says, encourages the teacher to express more about the problem, and reflects through verification of the teacher's perception, and the teacher's responsibility (T) increases. The teacher as an individual knows well what learning changes need to be made, and the teacher has the ability to think and act independently. The decision is in the hands of the teacher himself. The role of the supervisor is only to assist the teacher in the thinking process while carrying out his actions. Different findings occurred at SMP Bilingual Terpadu Krian, where the principal and teachers together provided input and suggestions in planning to improve teacher behavior in learning. In this case, the principal has taken a collaborative interpersonal approach. Where in the middle of Figure 2.2, such as presenting ideas, solving problems by asking for advice, and negotiating to determine the right action, between the supervisor and the teacher have the same or equal responsibility. The collaborative approach and behavior expect that problem solving is done together with the teacher. The supervisor encourages the teacher to present his perceptions and ideas and the supervisor also provides his views. The result is an exchange of ideas or concepts. Both participants understand that they will make an action agreement.

This difference in findings is not a significant problem because the principal does need to apply a situational leadership style in implementing clinical supervision. Sometimes the teacher being supervised is a teacher who has control and is able to make his own decisions, so the principal only needs to provide the necessary direction, as needed. Conversely, sometimes the principal is faced with a situation that requires him to take the same or equal role as the teacher. However, it should be remembered that the supervisor must avoid implementing clinical supervision with a directive informational interpersonal approach and a direct control interpersonal approach because the role of the supervisor in both approaches is very dominant and the teacher only follows the supervisor's instructions. This can cause tension and feelings of discomfort among teachers so that collegial relationships will not be realized.

Directive informational and directive control approaches and behaviors can only be applied by supervisors under certain conditions, namely a) when teachers are at an intermediate level of development, b) when teachers do not have knowledge about the problems faced, c) when teachers feel confused and do not have experience of what to do, d) when supervisors feel responsible for what teachers choose, e) when teachers believe that supervisors can be trusted, and f) when time is short (Glickman, 2014). Aspects of the school context that influence effective supervision and support the success of the learning process are organizational climate. Teacher performance in schools is largely determined by the atmosphere or climate in which they work. An organization when associated with the school organizational climate is an atmosphere in an organization created by the prevailing pattern of interpersonal relationships. A conducive organizational climate is needed by teachers to foster motivation within the teacher to work more enthusiastically. This means that the school organizational climate influences the level of teacher motivation (Susanto, 2016). Field findings show that the school climate at SMP Al Falah Assalam Sidoarjo and SMP Bilingual Terpadu Krian is very collaborative, there is openness, mutual trust, and sharing of knowledge and skills between teachers both through MGMPs, formal and informal discussions. This is in line with Hoy and Forsyth that the leadership of the principal, the nature of the teacher group, and their reciprocal interactions are key components in identifying the school's social climate.

The second component of the school climate is teacher interaction which is thought to have a major impact on the school atmosphere, namely teacher behavior that is collegial, intimate and detached. Collegial behavior refers to supportive professional relationships between teachers. Teachers respect, accept, and support each other, and feel a sense of accomplishment in their work. Most importantly, teachers respect the professional competence and dedication of their colleagues. Intimate behavior refers to close personal relationships between teachers both inside and outside the school environment. Teachers have closest friends, namely other teachers in the school; they visit each other and tell each other stories. The same thing was conveyed by Stol (Supardi, 2013) that schools that have a positive and conducive climate have 20 indications, including a climate of mutual respect and trust between teachers and students, as well as a climate of mutual trust and open communication interactions in the school environment. Therefore, the concept of climate is important for the analysis and practice of supervision because climate has a major influence on the behavior of teachers and supervisors. Based on findings in the field and the opinions of experts, the relationship between the principal and teachers in the implementation of clinical supervision is based on collegial or peer relationships. Where the behavior of the principal in carrying out clinical supervision can use an indirect interpersonal approach (nondirective interpersonal approach) or a collaborative interpersonal approach (collaborative interpersonal approach). The work climate that strongly supports collegial relationships in clinical supervision is collaborative interaction, open communication in both formal and informal discussions, mutual trust, and sharing knowledge and skills between teachers.

### Effectiveness of Clinical Supervision Implementation

Clinical supervision is a series of systematic supervision activities, the result of collaboration between the principal as a professional and experienced supervisor and teachers who carry out teaching and learning activities in the classroom aimed at improving the quality of learning (Priansa, 2017). Acheson and Gall (1987) stated that the effectiveness of clinical supervision is one of the important aspects of clinical supervision. The effectiveness of clinical supervision is determined by two things, namely the perception of the principal and teachers regarding the implementation of clinical supervision and the impact of clinical supervision on effective teaching. Findings in the field show that although the quality of learning at Al Falah Middle School, Sidoarjo is still quite good, this can be seen from the achievement of the National Examination score which is in the top five in Sidoarjo district, it is still necessary to guarantee the quality of learning in the classroom.

Likewise, in Integrated Bilingual Middle Schools which already have quite good non-academic achievements, it is necessary to balance it with improving the academic achievement of students. Academic achievement can be achieved if teachers are able to present quality learning in the classroom, namely learning that is interesting, contextual and meaningful. And this is the principal's task as a learning leader in the school to build a conducive learning climate in the school, for example through discussions between teachers, sharing good practices from senior teachers to junior teachers, regular training for teachers and carrying out supervision. Clinical supervision carried out in schools has an impact that can change teachers' teaching behavior to be better. This can be seen from the achievement of clinical supervision scores carried out on teachers at Al Falah Assalam Sidoarjo Middle School and teachers at Krian Integrated Bilingual Middle School. The following is a recapitulation of the results of clinical supervision of the four teachers.

Table 1. Results of Changes in Teacher Behavior Observed in Clinical Supervision "Implementing Syntax or Steps of Problem-Based Learning (PBL) Models in Mathematics Learning" at Al Falah Assalam Middle School, Sidoarjo

Teacher Name	Supervised aspects	Criteria	Before clinical supervision	After clinical supervision
FC	a. Problem Based Learning Syntax	1. Orienting students to the problem	2	4
		2. Organizing students to learn	3	4
		3. Guiding individual/group investigations	2	4
		4. Developing and presenting results	2	4
		5. Analyzing and evaluating the problem-solving process	2	3
	b. Implementation of Learning	1. Create an inclusive learning atmosphere and encourage students to be actively involved in problem solving.	2	4
		2. Provide challenging questions and direct students towards critical thinking.	2	4
		3. Facilitate group discussions effectively, provide constructive feedback, and encourage students to learn from each other.	3	4
Score obtained			18	31
The value			56,25	96,88

Tabel 2. Results of Behavioral Changes Observed in Clinical Supervision "Implementing Contextual Learning in Mathematics Learning" at Krian Integrated Bilingual Middle School

Teacher Name	Supervised aspects	Criteria	Before clinical supervision	After clinical supervision
DA	Implementation in learning	1. Relating learning materials to students' real lives	2	3
		2. Using relevant and authentic learning resources	2	3
		3. Actively involving students	2	3



		4. Creating a fun and inclusive learning atmosphere	2	3
		5. Asking questions that stimulate critical thinking	1	3
		6. Facilitating effective group discussions	2	3
		7. Providing constructive feedback to students	1	3
Score obtained			12	21
The value			57,14	100

Based on tables 1 and 2, it can be seen that both teachers experienced an increase in scores after clinical supervision in each focus of desired behavioral change. Teacher FC experienced an increase in scores from 56.25 before clinical supervision to 96.88 after clinical supervision. While teacher DA experienced an increase in scores from 57.14 before clinical supervision to 100 after clinical supervision. Both teachers were able to apply a fun, non-boring and effective learning model in the classroom. In addition, clinical supervision is also very effective in improving the quality of learning in the classroom, this can be seen from the high enthusiasm of students in learning, interactive in discussions, understanding the material and being able to do assignments from the teacher well. Teaching becomes effective. This will certainly improve student learning outcomes. The findings of this study are in accordance with the results of research by Veloo et al. (2013), Humairoh et al. (2016) and Mena et al. (2016) who conducted research on the impact of clinical supervision on the quality of learning and the quality of teacher performance. The results of the study showed that clinical supervision practices can improve the quality of teacher teaching, as evidenced by the average post-test score being higher than the average pre-test score and teacher teaching behavior improving. Therefore, clinical supervision has an important role in the world of education. The existence of clinical supervision of teachers can become quality teachers so that they can produce smart and high-achieving students (Makawimbang, 2013).

The findings at Al Falah Assalam Middle School, Sidoarjo and Krian Integrated Bilingual Middle School showed that the effectiveness of clinical supervision in improving the quality of teacher learning in this class can be seen from the following indicators: 1) increasing the quality of learning in terms of knowledge, skills, and attitudes of students, 2) teachers experience changes in teaching behavior to be better, more innovative, creative and enjoyable 3) students are enthusiastic in participating in learning, 4) students understand the material well, 5) student grades increase. The indicators of the success of supervision are in accordance with what was explained by Makawimbang (2013) that the expected objectives of the implementation of clinical supervision can be seen from the achievement of the following things: 1) students have paid attention to the teacher who is explaining the material, 2) students can answer questions from the teacher about what has been explained, 3) learning objectives are achieved, 4) teachers have succeeded in developing components of teaching skills, 5) problems faced by teachers are solved, and 6) the relationship between supervisors and teachers becomes closer. Based on findings in the field and the opinions of these experts, the implementation of clinical supervision has an impact that is able to change teacher teaching behavior for the better and is very effective in improving the quality of teacher learning in the classroom. The effectiveness and success of the implementation of clinical supervision can be seen from the emergence of the following indicators: 1) increasing the quality of learning in terms of knowledge, skills, and attitudes of students, 2) teachers experience changes in teaching behavior to be better, more innovative, creative and enjoyable 3) students are enthusiastic in participating in learning, 4) students understand the material well, 5) student grades increase and 6) the relationship between supervisors and teachers becomes closer.

## V. CONCLUSION

The conclusion of this research is that the implementation of clinical supervision at Krian Integrated Bilingual Middle School and Al Falah Assalam Middle School in Sidoarjo has shown significant improvement and development. Clinical supervision is a process aimed at assisting teachers in enhancing their teaching behaviors and improving classroom learning quality, initiated by the teachers themselves through planning meetings, classroom observations, and feedback sessions. The behaviors of school principals and teachers in fostering collegial relationships during clinical supervision are reflected in collaborative interactions, open communication in both formal and informal discussions, mutual trust, and the sharing of knowledge and skills among teachers. The principal employs both nondirective interpersonal and collaborative interpersonal approaches in conducting clinical supervision. Furthermore, clinical supervision has proven effective in transforming teachers' teaching behaviors for the better, significantly enhancing the quality of learning in the classroom, as evidenced by the increase in teacher FC's score from 56.25 before supervision to 96.88 after supervision, and teacher DA's score increasing from 57.14 to 100 following clinical supervision.

For school principals, it is essential to socialize the concept of clinical supervision to teachers so that they understand its essence and are expected to maintain their professionalism as supervisors in guiding, nurturing, and directing teachers in their roles as educators. Teachers are encouraged to view clinical supervision as a platform for self-development and enhancing their professionalism to improve the quality of learning. Additionally, for other researchers interested in similar topics, this study can serve as a valuable reference for understanding the implementation of clinical supervision aimed at enhancing learning quality at Al Falah Assalam Middle School and Krian Integrated Bilingual Middle School.

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