THE IMPLEMENTATION OF CLINICAL SUPERVISION MODELS TOWARDS THE LANGUAGE TEACHING AND LEARNING

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ABSTRACT

The effective supervision assists the teacher trainees or supervisee develop themselves in terms of the professional development such as teaching instructions or methods, content, and also pedagogy. This article is aimed to explore as well as discuss the related literature particularly on clinical supervision. It describes best practices in clinical supervision through a set of relevant previous studies, and the roles of supervisor, supervisee, and the students in relation to the use of clinical supervision models used. It also deals with providing some useful guidelines for students and supervisors (not only for clinical students) to pursue the development of relationship among them in conducting the clinical supervision models. Therefore, the review of related literature focuses on clinical supervision which is expected to help the whole parties in the supervisory process to accelerate their goals as well as objectives clearly, and also to minimize the potential problems and facilitate the implementation of effective supervision.

Keywords: Clinical Supervision Models, Teaching and Learning Language, Supervisor, Supervisee.

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Introduction

Supervision has now become the crucial way to develop the teachers’ performances in terms of teaching and learning process particularly. In addition, it can be tool to help them create an appropriate teaching model, content, and also instructions. This article is closely related to review as well as elaborate the relevant theories which mostly deals with the implementation and management of clinical supervision in general and a number of its models in particular. By conducting the supervision, there are some valuable feedbacks that can be acquired by the teachers themselves from the supervisor. Meanwhile, Harris (cited in Cames, 2007) mentions that supervision of instruction as: what school personnel do with adult and things to maintain or change the school operation in ways that directly influence the teaching processes employed to promote learning. Regarding the previous statement, the supervision is very influential in terms of building the effective teaching and learning process itself. In addition, Fanselow (cited in Richards and Nunan, 1990) defines that major aims of supervision are to “evaluate” and to “help” teachers-in-preparation. He provides an alternative view of supervision as a means of encouraging teachers to see common classroom events from different perspectives. Therefore, there are some appropriate techniques as well as methods which are generally employed for the purpose of providing an alternative view of supervision.

According to Richards and Nunan (1990), there are five major tasks which belong to the supervisor such as (1) to direct or guide the teacher’s teaching, (2) to offer suggestions on the best way to teach, (3) to model teaching, (4) to advise teachers, and also (5) to evaluate the teacher’s teaching. Therefore, the supervisor has a number of roles as a guide, model, advisor, and also evaluate. In one hand, he/she provides the appropriate direction or guidance in terms of supervising the teacher’s performance. In the other hand, he/she can also advise, evaluate, and also model the nature of teaching to the teachers in particular. As a result, The purpose of clinical supervision is “to help teachers develop and improve through cooperative planning, observation, and feedback” (Gursoy et.al, cited in Acheson & Gall 2003). Meanwhile, Abiddin (cited in Fowler, 1996) suggests that clinical supervision provided on an individual basis aims to enable the supervisee to do the job better, and to provide informed, enhancing interactions,
such as professional support, role development, improving confidence, intra and interprofessional networking and improved job control and satisfaction with a view to improving clinical outcomes. From the statements above, clinical supervision provides a number of valuable inputs not only for the supervisor but also for the supervisee in the forms of professional aids, role development, confidence improvement, networking, and also job control quality.

In this study, it can be beneficial to show the related difference between general and clinical supervision because this is mostly concerned with the issue of clinical supervision. In relation to the previous statement, Cames (2007) mentions that General supervision has something to do with out-of-class operations, with administrative aspects while, on the contrary, clinical supervision is something much more specific, an in-class support system, the crucial objective of which is to deliver assistance, counselling and guidance by a competent and skilful observer, all of the efforts tending to improve instruction, a teacher's performance and professional growth, the final impact being the improvement of student learning. Based on the statements, it can be concluded that general supervision deals with examining or supervising the administrative aspects meanwhile the clinical supervision focuses on supervising the teachers’ instructions, performances, and also professional developments. This can lead to the improvement of student’s learning as well as achievements in terms of using clinical supervision as the main tool in supervising the students teacher.

This article discusses a number of clinical supervision models commonly employed by the supervisors in different areas. This theories are assumed to help the teacher as supervisee as well as the students in terms of achieving their own objectives. In this study, the descriptions mostly deals with roles and practices of supervisor and teacher as a supervisee. Both of them should run their own roles effectively. Thus, this paper explores a review of the literature on clinical supervision. It focuses on two major areas: the concept of clinical supervision and its theoretical foundations; and the nature of the supervisor supervisee relationship

What is meant by ‘Supervision’.
In this section, there are a number of theories which are elaborated one by one in relation to the general definitions of supervision itself. Thus, it is also in relation to it, Good (cited in Cames, 2007) defines supervision as all efforts of designated school officials directed toward providing leadership to teachers and other educational workers in the improvement of instruction; it involves the stimulation of professional growth and development of teachers, the selection and revision of education objectives, materials of instruction, and methods of teaching and the evaluation of instruction. It is clear that it involves not only the supervisor but also the other teachers for the purpose of improvement as well as development of teachers’ professionalism, educational objectives, instructional materials, and also teaching procedures or instructions.

The Concept of Clinical Supervision

In terms of building the effective language teaching, there must be a relevant solution which enables the teacher to teach the students effectively is clinical supervision. It is also considered to be one prominent aspect of teacher education. Gursoy et.al (2013) mentions the idea of “clinical supervision” was first developed by Goldhammer (1969) (cited in Hopkins, Scott, Moore & Kenneth 1993) in 1960’s. And also states that the basic idea of clinical supervision was to focus on data collection process during observations. Furthermore, the term clinical supervision was adopted from the medical profession as it describes a process in which the skills and knowledge of trainees are developed in practice (Gursoy et.al, 2013). It is in line with Gursoy et.al (cited in Cogan, 1973) developed and supported clinical supervision and took attention to the importance of professional interactions between stakeholders (in this case, teacher and observer) to help teacher’s professional development. Basically, Gursoy et.al (cited in Cogan, 1973) defined eight stages of clinical supervision, which focused on planning, observation, and feedback. This is closely in relation to clinical supervision is defined as the actual process in which the supervisor observe, analyze, and also evaluate the teacher’s performance systematically (Richards and Nunan, 1990). Moreover, they also define the clinical supervision as on going process of teacher development that is based on direct observation of classroom teaching performance. It is also known as cyclical process consisting of three stages: pre observation, observation, and postobservation.
Previous Studies
In this section, there are some elaborations which focuses on providing the previous studies in relation to a number of clinical supervision models. This also shows the implementation as well as management of using the clinical supervision models for in-service teachers particularly. Gursoy et.al (2013) investigated the implementation of clinical supervision model to improve the supervisory skills of cooperating teachers and university supervisor during teaching practices. The result reveals that from the analysis of the quantitative and qualitative data, a systematic organization such as the clinical supervision model can improve trainees’ satisfaction with the process. The clinical supervision model increased the number of observations and the quality of feedback. Moreover, teacher trainees participation in the process also increases, as the clinical supervision model provides opportunities for reflective practice with two and three-way conferences. The analysis of the qualitative data also provided some detailed information about TTs’ understanding of the process. Although the majority of the control group stated that they have received feedback after their teaching, they also stated that these were not given in the form of meetings with adequate time for reflection. The feedback was given during unorganized impromptu meetings.

The illustration based on Gursoy et.al, this indicates that one control group teacher trainee stated that “I received oral feedback. During break time my Supervisor evaluated my teaching and told me my weaknesses and strengths”. Another mentioned that “My Supervisor told me that I was successful. Supervisor said he liked my method.” A teacher trainee also stated that he asked for a feedback and the supervisor said that s/he liked his/her performance. These examples illustrate that although the majority of untrained Ss provide feedback, the amount is limited. Moreover, since this feedback is given in an impromptu meeting there is no opportunity for the teacher trainee to reflect on his/her own performance. In these meetings the S either gives a positive remark or simply provides a list of weaknesses and strengths. It can be understood from the teacher trainees statements of the teacher trainees in the control group that the feedback they received was directive rather than reflective.
Abiddin (2008) conducts a conceptual article which emphasizes on one of supervisory approach commonly adopted towards student/trainee in order to help them achieve their objectives. In this, roles and practices of supervisor and supervisee are described. Both parties either a supervisor or supervisee should play their roles effectively. Hence, this paper explores a review of the literature on clinical supervision. It focuses on two major areas: the concept of clinical supervision and its theoretical foundations; and the nature of the supervisor supervisee relationship.

The current study investigated whether the use of the CSM (Clinical Supervision Model) in teaching practices has an effect on the teaching performance of TTs (Teacher Trainees). Data analyses revealed that scores from the group that used the CSM were consistently higher than scores from the control group. The t-test results indicated that these scores were significantly higher than the control group in video 1 and video 3. In addition, scores from both groups increased significantly from video 1 to video 3; however, there was no significant difference between the control group and the experimental group in the size of the increase. Thus, there is limited support for the idea that use of the CSM improved the teaching performance of TTs. It appears that use of the CSM had a positive effect on the effectiveness of TTs’ teaching, as evidenced by their consistently higher scores in video 1 and video 3. However, the lack of a significant difference between the experimental and control groups in the amount of change between video 1 and video 3 suggests that more practice in the use of the CSM might result in a significantly different increase in teaching effectiveness.

From the studies done by Gursoy et al. (2013) and also Abiddin (2008), and also Bulunuz et al. (2014), it can be concluded that the implementation of clinical supervision model are successfully employed by the supervisors in terms of evaluating the teacher trainees’ performances in teaching. This program can reflect the improvement of the teacher trainees for the purpose of using the appropriate teaching instructions, content, and also techniques. From the above statement, the roles of supervisor is very crucial in providing evaluative judgement to the teacher as supervisee.

The Clinical Supervision Models
Clinical supervision deals with the development of the teachers’ competences as well as instructions in teaching certain materials. The systematic manner in which supervision is applied is called a model (Abiddin, 2008). Training in theory and models of supervision improves the background knowledge of the supervisors, and guides them how to manage the student learning, as well as how to analyse the supervisees’ experiences and development.

Faugier and Butterworth (1994) propose models of supervision divided into three major categories. Firstly there are those which describe supervision in relation to the main functions of the supervisory relationship and its constituents. Secondly there are those which describe the main functions of the role, and thirdly there are those developmental models which emphasise the process of the supervisory relationship. However, Yegdich (1999) argues that in categorising the literature on supervision into these three forms, the authors have sidestepped debate on the essential differences between a supervisory approach and a therapeutic one. She asserts that supervision is concerned primarily with the client and the professional development of the supervisee.

Based on the relevant theories proposed by Gebhard (1984) mentions five models of supervision for pre-service and in-service teacher education programs, which enable teacher educators various options in it. The five models are: (i) Directive, where the teacher or the trainee is directed and briefed, the desired instructional behaviors are modelled, and the teacher’s skills are evaluated based on the pre-defined and enacted behavior by the supervisor; (ii) Alternative, where the supervisor offers a number of alternative suggestions to the trainee for the actions to be taken without any subjective prescriptions. This way, the trainee still has the authority to make decisions; (iii) Collaborative, where the supervisor works with the supervisee, but does not direct him, by a sharing and effective communication. First, an issue is posed in the teaching context, and the parties work together on the definition, examination and the implementation stages; (iv) Nondirective, where the supervisors’ role is to offer a listening ear to the trainees and recapitulate their statements to foster more individualistic choices by the trainees; and (v) Creative, where an eclectic approach to
supervision is exercise by combining supervisory behaviors and responsibilities from previous models and insights from other disciplines.

It is obvious that the models of clinical supervision consists of a number of various types proposed by Gebhard as well as Faugier and Butterworth. Each type has its own function as well as procedure which can be employed for the purpose of building the teachers’ professionalism in teaching language particularly. It also provides relevant inputs for the teacher as supervisee to improve as well as improve their own knowledge in classroom management, teaching methods, and also content in general.

Conclusions
Clinical supervision closely deals with individual development, professional growth and career development of the supervisees or teacher trainees. The supervisor’s role is to help learners to achieve their goals or objectives by acting as counsellor, facilitator and advisor. Counselling is a part of the clinical supervision because it can lead to an integrated relationship between the supervisor and supervisee. It includes support, feedback, counselling, consultation, teaching, evaluation, motivation and the monitoring of professional issues.

Clinical supervision models are successfully used to solve the problems of the current teaching certain materials due to its organizational structure, which provides relevant feedback to the teacher trainee or supervisee. Nevertheless, the teacher trainees are not the only ones who obtain the beneficial inputs from the implementation of clinical supervision models but also its structure enables both Supervisor and the other teacher as cooperating one to reflect on their performances for further improvement of teaching practices as well as performances.

The clinical supervision models are the effective ways to improve teaching practices as well as performances done by the student teacher or teacher educator. But the future studies need to consider the long-term effects of the clinical supervision models is necessary to conduct because the models require considerable improvement of time and resources in order to be simply effective and beneficial.
References


Biography

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