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UTILIZATION OF CLINICAL SUPERVISION MODEL TOWARDS STRENGTHENING INSTRUCTIONAL LEADERSHIP CAPABILITIES OF ARALING PANLIPUNAN TEACHERS IN A PUBLIC SCHOOL IN THE DIVISION OF MANILA DURING THE SCHOOL YEAR 2018- 2019

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A. Research Title: Utilization of Clinical Supervision Model Towards Strengthening Instructional Leadership Capabilities of Social Studies Teachers In a Public School in the Division of Manila during the School year 2018-2019

B. ABSTRACT

This research aims to strengthen the instructional leadership competencies of eight Social Studies teachers with the use of clinical supervision model (Glanz, 2006). This intervention was used in a quasi-experimental research involving one group. Pre-clinical supervision and post-clinical supervision were adopted. The data derived from these two episodes of observations of classes which were about the instructional leadership competencies based on the indicators prescribed in the COT-RPMS were compared with the use of statistical treatments such as weighted mean, ANOVA and t-test.

The study revealed that during the pre-clinical supervision observation of classes, four indicators in instructional leadership competencies of the teachers were described as somewhat competent and five were described as moderately competent. It was further revealed that with the f-value of 0.499 which is lower than the tabular value of 3.30 the instructional competencies of the eight teachers during the pre-clinical supervision had no significant difference.

Meanwhile, during the post-clinical supervision observation of classes the instructional leadership competencies of the Social Studies teachers improved with the seven indicators described as competent and two competencies described as moderately competent. It was revealed that with the f-value of 0.780 which is lower than the tabular value of 3.30, the instructional competencies of the eight teachers during the post-clinical supervision had no significant difference.

Lastly, when the mean competence of the Social Studies teachers in the pre-clinical and post-clinical supervision observation were compared, it was revealed that the t-computed value which is 7.67 is higher than t-value of 1.895 which means that there is significant difference in the mean competence of the teachers. This indicates that the instructional leadership competencies of the teachers were improved.

Based from the findings of this research, the researcher reflected on the following implications and recommendations: a. The school administrators should utilize clinical supervision to help teachers become more competent as instructional leaders; b. The schools should provide seminar for both teachers and schools administrators to discuss the significance of clinical supervision; and c. Since the intervention was only done in a limited period of time, the researcher decided to apply the clinical supervision model considering the longer time frame to validate the result of this study.

Keywords: Clinical supervision, COT-RPMS, Instructional leadership capabilities, optimal learning pre-clinical supervision, post-clinical supervision, supervisory program, planning, observing, reflecting

C. INTRODUCTION

Every classroom teacher is an instructional leader. This meaningful and powerful statement motivates that researcher to focus her research on the utilization of clinical supervision model to strengthen the instructional leadership capabilities of Social Studies teachers. The researcher strongly believes that once the teachers are properly guided and supported by their subject area head, their strengths can be sustained and weaknesses will be determined hence corresponding assistance or appropriate help can be extended. This is the essence of clinical supervision. Clinical supervision is a process by which a teacher receives individualized support to enhance their instruction in order to improve education for all students (Turan, 2018)

Social Studies teachers are expected to actively participate in the realization of Deped's thrusts such as developing students with definite sense of identity and role as Filipinos who are participating in a dynamic life in a society, country and the world at large. Due to the increasing demands imposed upon the teachers, it is necessary to strengthen their instructional leadership capabilities for them to effectively deliver the lesson to the students and contribute significantly in improving their performance. Santrock (2006) explained that having a thoughtful, flexible, conceptual understanding of the subject matter is indispensable for being an effective teacher. Gurung (2009) discussed that effective teachers as instructional leader promote optimal learning. Teachers must be leaders of learner-centered community in which an atmosphere of trust and openness produces a stimulating exchange of ideas and mutual respect (Sergiovanni, 1996). If teachers encourage self-directed learning and they model respectful behavior they successfully promote optimal learning (Glickman, 2002). These are basically what is developed among teachers when clinical supervision is provided to them.

For several instances that observation of classes was done by the researcher, she observed that teachers in Social Studies need to improve in some aspects of instruction like the art of questioning, judicious utilization of appropriate strategies, processing of students answer, smooth linking or transitioning of one part of the lesson to another, judicious use of graphic organizer to scaffold instruction, facilitating group activities and involving and encouraging students to formulate generalization. This observation motivated the researcher to adopt clinical supervision.

Several literatures revealed the advantages of clinical supervision. Dundon (2002) presented that clinical supervision helps teachers to become more analytical of their own instruction. Furthermore, Valin (2018) posited that it creates more democratic relation and the teachers' performance improved. In addition, school leaders contribute in the continuous improvement of people when clinical supervision is provided to the teachers (Palestini, 2003). Finally, Komuji (2018) revealed that clinical supervision helps teachers improve teaching and learning to enhance students' understanding.

The researcher is convinced that if the capabilities of the teachers the areas of instruction will be strengthened, learning of students will become more possible and effective. It is for this reason and existing backgrounds this research was conceived.

a. Significance of the Study/Rationale

In the desire of the researcher to improve the instructional leadership competencies of the teachers, she intends to implement clinical supervision as intervention. According to Glanz (2006), clinical supervision is a cyclical process of engaging teachers in instructional dialogue based on the three stages: **planning, observing and analysis of reflection.**

This model of supervision of supervision was developed 30 years ago due to grow out of dissatisfaction with traditional educational practices and supervisory method (Glanz, 2006). This model was originally invented by Morris Cogan who looked at clinical supervision based on the notion that teaching could be improved by a prescribed, formal process of collaboration between teacher and supervisor. Glanz (2006) emphasized that it focuses on improvement of instruction by means of cycles of planning, observation and intensive intellectual analysis during a feedback conference. It was revealed in researches that clinical supervision is a superb means for improving teaching and promoting students learning.

b. Research Problem/Questions

This research focuses on the utilization of clinical supervision model to strengthen the instructional leadership capabilities of Social Studies teachers. It aims to answer the following queries:

1. How can the instructional leadership capabilities of the teachers be described based on the pre-clinical supervision observation of classes?
2. Is there a significant difference in the instructional leadership capabilities of the Social Studies teachers based on observation of classes during the pre-clinical supervision?
3. How can the instructional leadership capabilities of the teachers be described during the post-clinical supervision observation of classes?
4. Is there a significant difference in the instructional leadership capabilities of the teacher based on observation of classes during the post-clinical supervision?
5. Is there a significant difference in the instructional leadership capabilities of the Social Studies teachers based on observation of classes during pre-clinical and post clinical supervisions?

D. METHODOLOGY

This research utilized the quantitative research method. Quantative research is typically used to answer questions about relationship among the measured variables with the purpose of explaining, predicting and controlling phenomena (Bueno, 2016). Specifically, this research utilized quasi-experimental design involving one group of participants. In the case of this research, the participants were the eight teachers of Social Studies who were subjected to clinical supervision as intervention. The implementation of the clinical supervision was done from September to October 2018.

a. Participants/Data Source

The participants of this research were the eight teachers of Social Studies. Purposive sampling was used as sampling technique because the intention of the researcher is to implement to them the clinical supervision.

b. Data Gathering Procedures and Instruments

The clinical supervision began with planning. The researcher made the schedule of the observation with the use of supervisory program. This supervisory program contains what specifically looked into the teachers’ instructional leadership competencies. These competencies were based from the COT-RPMS instrument.

The teachers were informed about the plan to implement clinical supervision. The purpose of this supervision was discussed with the teachers concerned. The supervisory program that was developed and planned to be implemented was also discussed with them.

Next to planning was observing. Pre-clinical supervision was done by the researchers during the month of September 2018. In the pre-clinical observation, the strengths and weaknesses of the teachers were determined and noted based on the competencies stipulated in the instrument. The results of the pre-clinical supervision were discussed to the teachers and considered in coming up with clinical supervision to be given to the teacher. The purpose of this is to help the teacher how he or she can be improved in certain area in instructional leadership competencies. After the pre-clinical supervision, the post-clinical supervision followed. This is the stage where the researcher observed the teachers on the areas of instructional leadership competency they need to improve.

The last stage of the clinical supervision is analysis of reflection. Analysis of reflection is based on the result of the pre-clinical and post-clinical supervision which served as basis of what will be the focus of the clinical supervision to be given to the teachers. The result of the pre and post-clinical observations were compared to find out how effective is the clinical supervision implemented by the researcher.

c. Data Analysis:

To analyze the data derived from this study, ANOVA and t-test were used as statistical treatments with the help of Microsoft excel to process the data. COT-RPMS instrument has the following scale with scales from 3, 4, 5, 6, and 7. In order to describe the instructional leadership of the teachers, a Likert scale was used which is presented below.

Scale	Description
6.50-7.00	Highly Competent
5.50-6.49	Competent
4.50-5.49	Moderately Competent
3.50-4.49	Somewhat Competent
3.00-3.49	Not Competent

The basis of determining whether the teacher needs an intensive clinical intervention is when the rating of the teachers in a certain competency falls within the range from 3.00 to 5.49 which specifically described as moderately competent, somewhat competent and not competent respectively.

E. RESULTS AND DISCUSSIONS

This part presents the results and discussion of the research based from the data derived.

Table 1: Instructional leadership Competencies of the Social Studies Teachers during the Pre-Clinical Supervision

Instructional Leadership Competencies	T1	T2	T3	T4	T5	T6	T7	T8	Mean	Dsept.
1. Applies knowledge of content within and across curriculum teaching areas.	4	5	4	4	3	5	4	5	4.25	SC
2. Uses a range of teaching that enhance learner chievement in literacy and numeracy skills	5	6	4	4	4	5	4	5	4.63	MC
3. Applies a range of teaching strategies to develop critical and creative thinking as well other higher order thinking skills	3	3	4	4	5	5	4	5	4.13	SC
4. Manages classroom structure to engage learners individually or in groups, in meaningful exploration, discovery and hands-on activities within a range of physical learning environments	3	3	3	4	6	5	4	5	4.13	SC
5. Manages learner behavior constructively by applying positive and non-violent discipline to ensure learning focused environments.	4	3	4	4	3	5	5	5	4.13	SC
6. Uses differentiated, developmentally appropriate learning experiences to address learners' gender, need, strengths, interests and experiences	5	4	4	4	4	5	5	5	4.50	MC
7. Plans, manages and implements developmentally sequenced teaching and learning processes to meet curriculum requirements and varied teaching contexts	4	5	4	4	5	5	5	5	4.63	MC
8. Selects, develops, organizes and uses appropriate teaching and learning resources, including ICT to address learning goals	4	3	4	4	3	5	5	5	4.13	MC
9. Designs, selects, organizes and uses diagnostic, formative and summative assessment strategies consistent with curriculum requirements	4	4	4	4	5	5	5	5	4.50	MC
Mean Competence/Over-all Mean Competence	4	4	3.89	4	4.22	5	4.56	5	4.33	SC
Description	SC	SC	SC	SC	SC	M C	MC	MC		
SD	0.46									

Table 1 shows the instructional leadership competencies of the Social Studies teachers during the pre-clinical supervision observation. Five teachers received mean competence of 3.89,

4 and 4.22 respectively and described as somewhat competent while three teachers received a mean competence of 4.56 and 5 and described as moderately competent. This indicates that teachers need the clinical supervision to strengthen their instructional competencies in some areas indicated in the COT-RPMS instrument. Teachers' competencies on 1, 3, 4, and 5 were described as somewhat competent while teachers' competencies on 2, 6, 7, 8, and 9 were described as moderately competent. The over-all mean competence in instructional leadership is 4.33 or described as somewhat competent.

Table2: Significant Difference in Instructional Leadership Competencies of Social Studies Teachers based from Pre-clinical Supervision Observation

	Degrees of Freedom	Sum of Squares	F-Value		Description	Interpretation
			Mean Squares	tabular value		
K-1	7	13.33	0.499	3.30	Accept Ho	Not Significant
(n-1)- (K-1)	64	26.67				
Total N-1	57	40				

Table 2 presents at 0.05 level of significance with degrees of freedom of 64 and F-value is 0.499 which is lower than the tabular value of 3.30 the null hypothesis is accepted and it was confirmed that there is no significant difference in the instructional leadership competencies of Social Studies teachers during the pre-clinical supervision observation. This indicates that the teachers' instructional leadership competencies need to be strengthened.

Table 3: Instructional Leadership Competencies of the Social Studies Teachers in the Post-Clinical Supervision Observation

Instructional Leadership Competencies	T1	T2	T3	T4	T5	T6	T7	T8	Mean	Dscrpt.
1. Applies knowledge of content within and across curriculum teaching areas.	5	6	4	7	7	4	6	6	5.63	C
2. Uses a range of teaching that enhance learner achievement in literacy and numeracy skills	5	6	4	5	5	6	4	6	5.13	MC
3. Applies a range of teaching strategies to develop critical and creative thinking as well other higher order thinking skills	5	6	6	4	6	7	5	6	5.63	C
4. Manages classroom structure to engage learners individually or in groups, in meaningful exploration, discovery and hands-on activities within a range of physical learning environments	5	6	5	5	5	6	5	7	5.50	C
5. Manages learner behavior constructively by applying positive and non-violent discipline to ensure learning focused environments.	5	6	5	5	5	5	5	5	5.13	MC
6. Uses differentiated, developmentally appropriate learning experiences to address learners' gender, need, strengths, interests and experiences	6	6	5	6	5	6	6	6	5.75	C
7. Plans, manages and implements developmentally sequenced teaching and learning	6	6	5	7	5	6	7	7	6.13	C

processes to meet curriculum requirements and varied teaching contexts										
8. Selects, develops, organizes and uses appropriate teaching and learning resources, including ICT to address learning goals	6	6	5	6	5	5	6	6	5.63	C
9. Designs, selects, organizes and uses diagnostic, formative and summative assessment strategies consistent with curriculum requirements	6	6	5	6	5	6	5	5	5.50	C
MeanCompetence/Over-all Mean Competence	5.44	6	4.89	5.67	5.33	5.67	5.44	6	5.56	
Description	MC	C	MC	C	MC	C	MC	C		
SD	0.37									

Table 4 presents the mean instructional leadership competencies of Social Studies teachers during the post-clinical supervision observation. It was revealed that mean competence of teachers on 1, 3, 4, 6, 7, 8 and 9 were 5.50, 5.63 and 6.13 respectively which described as competent while on 2 and 5 were 5.13 which described as moderately competent. This reveals that teachers instructional leadership competencies was strengthened because of the clinical supervision given to them.

Table 4: Significant Difference in the Instructional Leadership Competencies of Social Studies Teachers in the Post-clinical Supervision Observation

	Degrees of Freedom	Sum of Squares	F-Value		Description	Interpretation
			Mean Squares	tabular value		
K-1	7	-148.44	-0.780	3.30	Accept Ho	Not Significant
(n-1)- (K-1)	64	190.22				
Total N-1	57	41.78				

Table 4 shows at 0.05 level of significance with 64 degrees freedom the F-value is -0.780 which is lower than the tabular value of 3.30 which rejects the null hypothesis and it was revealed that there is no significant difference in the instructional leadership competencies of Araling Panlipunan teachers during post-clinical supervision observation. The instructional leadership competencies of the eight teachers significantly strengthened as a result of the clinical supervision provided to them.

Table 5: Significant Difference in the Instructional Leadership Competencies of the Social Studies Teachers in the Pre-clinical and Post-clinical Supervision Observation

Intervention	Mean	SD	Df	t-computed value	t.05	Description	Interpretation
Pre-clinical	4.33	0.46	7	-7.67	1.895	Reject Ho	Significant
Post-Clinical	5.56	0.37					

Table 5 shows the significant difference in the instructional competencies of the Social Studies teachers in the pre-clinical and post-clinical supervision observation. At 0.05 level of significance with degrees of freedom of 7 and t-computed value of -7.67 which is higher than t-value of 1.895 the null hypothesis is rejected. This indicates that there is significant difference in the mean competence of Social Studies teachers in the pre-clinical and post-clinical supervision observations. This result is further proven by the increased in the number of competencies improved and described as competent. Furthermore, considering the standard deviation of 0.46 and 0.37 in pre-clinical and post-clinical supervision this means that the instructional competencies of the teachers are close or almost similar to one another. Hence, clinical supervision is effective.

F. CONCLUSIONS AND RECOMMENDATIONS

Based the results of the study the following are the findings drawn:

a. Summary of Findings

The research reveals that the clinical supervision utilized by the researcher strengthens the instructional leadership competencies of the Social Studies teachers. This becomes possible because of the assistance provided to the teachers which is the basic premise of the clinical supervision model.

b. Implication/Reflection and Recommendations

Based from the findings of this research, the researcher reflected on the following implications and recommendations: a. The school administrators should utilize clinical supervision to help teachers become more competent as instructional leaders; b. The schools should provide seminar for both teachers and schools administrators to discuss the significance of clinical supervision; and c. Since the intervention was only done in a limited period of time, the researcher decided to apply the clinical supervision model considering the longer time frame to validate the result of this study.

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