

SOLUTION-FOCUSED MODELS OF CLINICAL SUPERVISION PRINCIPALS TO OVERCOME LEARNING GAPS IN POST- PANDEMIC ELEMENTARY SCHOOLS

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ABSTRACT

The problem of learning gaps was found to be predominant among students in post pandemic school. This study aims to determine solution-focused model of clinical supervision in elementary schools can overcome learning gaps. This research used collaborative classroom action research carried out in cycles. This research was carried out at Khoiru Ummah Integrated Islamic Elementary School. The objects in this study were students and class teachers at Khoiru Ummah Integrated Islamic Elementary School, which focused on the grade fifth. Data were collected using clinical supervision observation sheets. The collected data is then analyzed. The results can be seen in reducing the percentage of learning gaps. Pre-cycle shows a learning gap percentage of 82%. Then after cycle I, the learning gap percentage decreased to 47%. In cycle II, the learning gap decreased to 8%. Implementation of the solution-focused model by sharing, understanding class needs, and supporting teachers in determining appropriate learning methods. The results of this research show that solution focused model clinical supervision can improve the quality of teacher learning in terms of overcoming learning gaps in the classroom.

ABSTRAK

Permasalahan terkait kesenjangan pembelajaran ditemukan dominan di kalangan siswa di sekolah pasca pandemi. Penelitian ini bertujuan untuk mengetahui model supervisi klinis yang berfokus pada solusi di sekolah dasar dapat mengatasi kesenjangan pembelajaran. Penelitian ini merupakan penelitian tindakan kelas kolaboratif yang dilaksanakan secara siklus. Penelitian ini dilaksanakan di SD Islam Terpadu Khoiru Ummah. Objek dalam penelitian ini adalah siswa dan wali kelas di SD Islam Terpadu Khoiru Ummah yang fokus pada kelas V. Data dikumpulkan dengan menggunakan lembar observasi supervisi klinis. Data yang terkumpul kemudian dianalisis. Hasilnya terlihat pada berkurangnya persentase kesenjangan pembelajaran. Prasiklus menunjukkan persentase kesenjangan pembelajaran sebesar 82%. Kemudian setelah siklus I persentase kesenjangan pembelajaran menurun menjadi 47%. Pada siklus II kesenjangan pembelajaran menurun menjadi 8%. Penerapan model yang berfokus pada solusi dengan berbagi, memahami kebutuhan kelas, dan mendukung guru dalam menentukan metode pembelajaran yang tepat. Hasil penelitian menunjukkan bahwa model supervisi klinis yang fokus pada solusi dapat meningkatkan kualitas pembelajaran guru dalam mengatasi kesenjangan pembelajaran di kelas.

Kata kunci: Supervisi Klinis, Model Berfokus pada Solusi, Kesenjangan Pembelajaran, Kelas, Pembelajaran

INTRODUCTION

The phenomenon of learning gaps is not only experienced by Indonesia. However, almost all countries in the world are also feeling the impact of closing schools due to the Covid-19 outbreak (Engzell, Frey, and Verghan, 2021; Jonson et al., 2014). Alongside this, there is also a learning gap in the form of learning inequality at school. The learning inequality that occurred during the pandemic occurred because students had limited access to: (1) digital gadgets/devices; (2) the adaptive ability of educators and science and technology; (3) financial/financial condition; and (3) active family or parents in providing encouragement (The SMERU Research Institute, 2020).

Further regarding the analysis of these causes, the findings of The SMERU Research Institute (2020) show that there are two aspects to the analysis of learning inequality. First, an analysis of learning inequality in the classroom shows that students who have access to digital gadgets/devices, teachers' adaptive abilities, higher social economic abilities, and have active families who exchange information with educators tend to have above average abilities. Second, the gap between students regarding learning outcomes contained in one class is expected to be wider. In addition, based on a study by INOVASI and Puslitjak (2020) it shows that there is a greater impact related to gaps which further widens the learning gap in the classroom (learning gap). Based on the study.

Then based on survey activities, interviews and observations that have been carried out on teachers and students at Khoiru Ummah Integrated Islamic Elementary School, Mlati, Sleman there are several problems that arise during full day face-to-face learning. The interview and observation activities were carried out from 18 July 2023 to 19 August 2023 in the first month of class promotion. The following describes some of the findings of the problems in the study.

Then it is known to students that students experience learning gaps due to the pandemic. Learning delays (learning gaps) because students lose the competencies they have learned before, are unable to complete their learning at the grade level or experience multiple impacts because they do not master learning at each level. As many as 67% of the 214 students could not understand the material according to their class competencies. Students must repeat the previous class material in order to further understand the class material. This is especially the case in terms of numeracy and literacy that occur in learning. For example, in numeration for grade 3 students, competence should have been smooth with addition and subtraction that was taught in grade 2 first. Meanwhile in the classroom there is also a learning gap due to a 'gap' or distance that occurs due to differences in treatment and facilities at home when learning from home (BDR) activities. Students who receive learning from their parents and have gadget facilities for online learning can exceed class competency achievements. Students with abilities beyond achievement were found to be 34%. Meanwhile, 66% of other students have abilities below the competency achievements of their class. This can be seen due to various factors, such as the fact that both parents are still working full time despite the pandemic, family difficulties operating gadgets, limited internet facilities, and limited gadget facilities that are used with other family members.

Based on some of these problems, it is known that there are several problems both in terms of teachers and students that occur during learning after the COVID-19 pandemic. Seeing the breadth of the problem, the researchers limit the problem to loss learning and learning gaps that exist in elementary schools. This is the most important thing to address immediately, so that student competence can be achieved according to the learning phase and stages of its development. The existence of learning gaps must be made improvements in

learning.

Improvements to learning that have not achieved the quality of education must begin with improving learning strategies based on the teaching carried out by the teacher (Mulyasa, 2007: 5). Then Tilaar and Suryadi (1992: 108) stated that the big or small component of the school's quality, one of which depends on the teacher's factor, because the teacher has a strategic role to carry out the learning process. If the teacher has difficulty carrying out lesson planning and the learning strategy used is not appropriate, so that in his activities it is necessary to provide guidance or supervision of the teacher as an educator. Satori (2019) reveals that the professional development of an educator is a form of business by providing motivation, assistance, encouragement and opportunities for employees to increase their professionalism in educating. This is necessary in order to be able to carry out its main task more optimally, in the form of improving teaching and learning process activities and improving the quality of teaching and learning outcomes (Satori, Fatah: 2019).

Mulyasa (2007) explains that one of the teacher's factors in carrying out teaching assignments is influenced by academic supervision. Academic supervision can be carried out by the principal or deputy head to improve the teaching and learning process in schools. The professional competence of teachers and principal leadership has a close relationship, there is a positive relationship that will optimize learning in schools for the better (Agung and Yufridawati, 2013). The principal as a supervisor has responsibility for the quality of the work of the teacher employees he leads (Dharma, 2019: 13). Academic supervision by school principals to foster teachers in order to improve the quality of the learning process, so that conceptual, technical, and interpersonal skills are needed (Glickman: 2017). Principals through academic supervision can create teacher professionalism development programs in order to improve a process and learning outcomes (Andang, 2014). The academic supervision model to support teacher capacity and competency in preparing and implementing learning is clinical supervision. The selection of the clinical supervision model as a form of school principal's service in order to improve the quality of elementary school teachers' capacity in designing and implementing learning and assessment techniques and learning evaluation (Flores & Derrington, 2017; Marwati et al., 2019; Musundire & Dreyer, 2019).

Clinical supervision as a guide that focuses on improving teaching in cycles of intensive and careful planning, observation and intellectual analysis of real teaching results in favor of rational transformation (Glanz, 2018; Hook et al., 2016; Hoque et al., 2020). Clinical supervision is not administrative but aims to further improve teachers' teaching skills to have a much better effect (Hoque et al., 2020; Motallebzadeh et al., 2017). Clinical supervision promotes teacher effectiveness in managing learning. The implementation process focuses more on finding causes or weaknesses in teaching and learning then immediately correcting these weaknesses or deficiencies. This supervision emphasizes clinical practice expressed in face-to-face relationships between supervisors and teachers.

Supervision face-to-face relationships can be more focused on solving problems. Parsons (2009) found that the basic skills of supervision are solution-focused which is the ability to see what is going on with the special lens of a solution-focused approach. Not to see someone looking for a solution, but to see someone who already has a solution but only needs to explore and implement it (Parsons, 2009). Thomas (2013) stated that clinical supervision with a solution-focused model supports strengths and resources. The solution-focused model is an impactful collaborative work to do because it focuses on thinking solutions, developing skills, and competencies (Thomas, 1994).

Based on the explanation above, it produces a view that to overcome learning gaps in

elementary schools, a solution-focused clinical supervision model can be carried out. This is considering the changes that occurred during the pandemic, both from online and offline combinations, limited face-to-face meetings, to full day learning again. So to improve the performance of teachers in schools, research was carried out related to the Solution-Focused Model Clinical Supervision of School Principals to Overcome Learning Gaps in Elementary Schools.

METHOD

The research conducted was institutional/school action research (PTS). This type of research is collaborative classroom action research that takes place in several cycles. According to Agung (2016), school action research is research that aims to improve activities carried out in schools, in order to improve school quality. This research cycle model is consistent with the Kemmis and Mc Taggart model (Kemmis and Mc Taggart, 1988). In Kemmis's research design, there is a cyclic system (cycle). In one cycle there are a series of activities which include planning, action, observation, and reflection. When the first cycle is almost finished, but the researcher still finds gaps in his thinking, the researcher can continue in the second cycle. Second cycle with the same problem.

The following is a cycle action scenario in Figure 1.

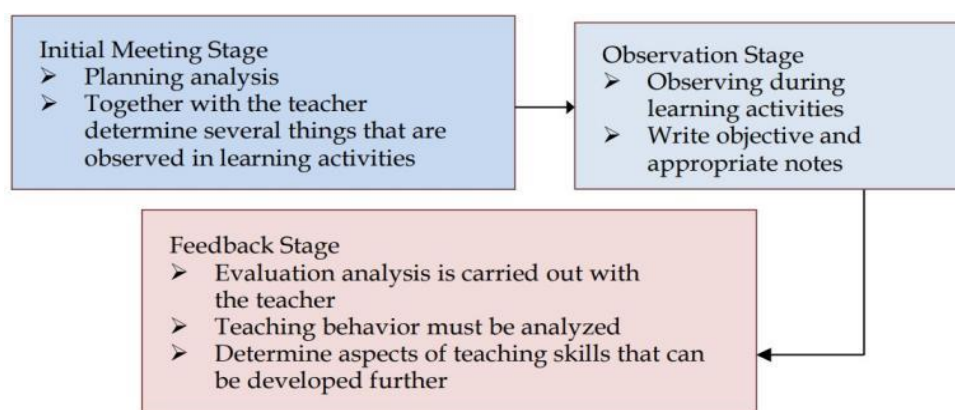


Figure 1. Clinical Supervision Cycle

This research uses collaborative classroom action research which is carried out in cycles. This research was conducted at the Khoiru Ummah Integrated Islamic Elementary School which is located at Jalan Kebon Agung No. 354, Getas, Gandekan, RT 07 RW 11, Tlogoadi, Mlati, Sleman. The objects in this study were students and class teachers at the Khoiru Ummah Integrated Islamic Elementary School, which focused on the upper grades, namely grades fifth with 34 students. This school action research (PTS) was carried out in the 2022/2023 school year, namely from January to March 2023. The implementation was adjusted to the learning schedule.

Collecting data using interviews, observation, and documentation. Interview as a data collection technique to learn more deeply (Sugiyono, 2016). Observation (observation) is a data collection technique by observing objects from each ongoing event and taking notes with the observatory on the things observed (Sanjaya, 2019). Documentation comes from the word document which means written elements (Arikunto, 2006). This includes notes during the activity, pictures or photos taken during the learning activity.

In this study, qualitative data analysis techniques were used to describe the results of

clinical supervision in order to overcome learning gaps before and after the action. Qualitative data analysis techniques based on observational data are strengthened by the results of interviews and documents during the research process. Data analysis techniques were carried out qualitatively by collecting data, reducing data, presenting data, and drawing conclusions (Miles and Huberman, 2007). Qualitative research allows data analysis to be carried out while the researcher is at school or after returning from school for analysis. At the data collection stage, the results were obtained from observations and interviews between researchers and school principals and class teachers at SDIT Khoiru Ummah. In this case, the researcher dug up data regarding the supervision carried out.

RESULTS AND DISCUSSION

Collaborative classroom action research carried out in cycles through the solution-focused model of clinical supervision. There are three stages implementation of solution-focused model of clinical supervision carried out the analyze the lesson plan with the teacher, observed aspect during learning activities, and the solution-focused clinical supervision process model activities to encourage learning innovation in teachers.

In the first cycle, analyzed together on the RPP regarding the ADLX (Active Deep Learning Experience) method. The method was chosen by the teacher to understand children and encourage student activity. Then according to the school principal this can be done but with adjustments. Adjustments related to learning steps, student grouping, and time allocation in lesson plans. In the first cycle, the principal encourages teachers to apply the knowledge gained. The teacher carries out learning with the ADLX method from the latest training. When it comes to implementation, the method is good because it is deep and makes students active. However, the teacher did not match the time allocation and the students' work was not completed. Then before entering the second meeting in the first cycle, the teacher is encouraged to carry out the method that is most mastered. Then at the second meeting the teacher carried out the cooperative learning method. The grouping with this method was effective, the time allocation was sufficient, and the students' work was completed. So that the progress of learning gaps in the class can be measured.

Classes were identified from the previous class phase, students who had not been able to build spatial competence were 28 students. In addition to geometric figures, there are also constraints on calculating whole numbers. At the beginning of the second cycle, there were 16 students who still did not understand. For problems in understanding the combination of geometric shapes. Meanwhile, there are no problems with whole numbers. The problems that still exist are in the form of individual constraints, there are two students who are still confused about the combination of spatial shapes. In the end of cycle, learning gaps in the class have been resolved. Jointly analyzed between the teacher and the principal regarding the Think-Pair-Share (TPS) method can accommodate the understanding of two students which needs to be strengthened. The TPS method can enrich understanding and confirm whether it is correct or which part needs help to understand. The following data is presented as solution-focused model of clinical supervision observation in cycles I and II.

Then this section explains the discussion related to the solution-focused model clinical supervision of school principals to overcome learning gaps in post-pandemic elementary schools. The action of clinical supervision in the solution-focused model which is carried out several meetings in three cycles can improve the quality of teachers to overcome learning gaps in the classroom. This is in line with the opinion of Alwis et al (2020) that clinical supervision can overcome problems that exist in schools or educational units. Choosing the

right monitoring model with clinical supervision will provide optimal results (Alwis et al., 2020; Kabilan & Khan, 2012). Optimal results by overcoming learning gaps in schools are closely related to interactions between school principals and teachers.

Interaction during clinical supervision with a solution-focused model, the principal stimulates the teacher with discussions and triggering questions so that the teacher understands the condition of the students in class. After understanding the student's condition, the principal leads the teacher for a discussion regarding learning methods or media that suit the needs of students and are suitable for the characteristics of the lesson. After that, continued discussions regarding mentoring and grouping students in class to overcome student learning gaps and learning gaps in class. This illustrates that the selection of clinical supervision models carried out as a form of school principal service has succeeded in increasing the quality and capacity of elementary school teachers in designing, implementing learning, assessing, and evaluating learning (Flores & Derrington, 2017; Marwati et al., 2019; Musundere & Dreyer, 2019). Then, the teacher is one of the elements that drives the teaching process (Enita, 2024).

Flores & Derrington (2017) further reviewed that the clinical supervision model carried out by school principals on teachers can have an impact on student learning outcomes and motivation. Clinical supervision used to improve or provide solutions to problems in schools can improve learning, so that it is closely related to student learning outcomes (Marwati, 2019). Musundere & Dreyer (2019) also confirms that clinical supervision can improve the learning outcomes of students who have not previously achieved competency and can then fulfill their competencies. This is because the learning process in class has been improved from the results of discussions on improvements during clinical supervision (Musundere & Dreyer, 2019).

The face-to-face supervision relationship carried out by the principal and teacher can also focus more on solving problems. Not only are the principals looking for solutions, but teachers are also finding solutions which are then explored and implemented. This is in line with Parsons (2009) who found that basic supervision skills focus on solutions in the form of the ability to see what is going on with the special lens of a solution-focused approach. Not to see someone looking for a solution, but to see someone who already has a solution but only needs to explore and implement it (Parsons, 2009). Clinical supervision with a solution-focused model to support strengths and resources in schools, one of which is teachers in the learning process. That matter,

This study found that choosing the right monitoring model with clinical supervision will provide optimal results (Alwis et al., 2020; Kabilan & Khan, 2012). Optimal results with overcoming learning gaps in schools are related to the close interaction between school principals and teachers. Interaction during clinical supervision with a solution-focused model, the principal stimulates the teacher with discussions and triggering questions so that the teacher understands the condition of the students in class. After understanding the student's condition, the principal leads the teacher for a discussion regarding learning methods or media that suit the needs of students and are suitable for the characteristics of the lesson.

Then a follow-up discussion regarding mentoring and grouping students in class to overcome student learning gaps in class. This illustrates that the selection of the clinical supervision model carried out as a form of school principal service has succeeded in increasing the quality and capacity of elementary school teachers in designing, implementing learning, assessing, and evaluating learning (Flores & Derrington, 2017; Marwati et al., 2019;

Musundere & Dreyer, 2019).

In addition, other research findings in the form of trigger questions leading to solutions can be referred to as 'relationship questions' which are used to invite teachers to describe their interactions with significant others and support the search for solutions (De Jong & Berg, 2013). These trigger questions make the teacher tell more stories, express the condition of the class. The teacher understands the condition of the class, so that he arrives at the teacher's explanation regarding the best possible solution for students. Various choices of solutions according to student conditions and suitable for use in class. Hearing the teacher's explanation, Ust Ana gave praise to the teacher who had submitted various solutions. The praise conveyed by the principal can be used to encourage and emphasize what is important to clients, their success. Therefore, more responsive and adaptive about management changes with better performance are needed to achieve organizational goals (Sударsono, 2024).

It was also found that the solution-focused model is collaborative work that has an impact on being carried out because it focuses on thinking solutions, developing skills, and competencies from existing resources (Thomas, 1994; 2013). Observation analysis was also carried out jointly between the principal as supervisor and teacher. In addition, the relationship between the supervisor and teacher must be a colleague relationship. This illustrates the existence of a healthy and productive supervisory relationship so as to highlight the elements of support, respect, trust, openness, and encouragement in it.

CONCLUSIONS

Clinical supervision of the solution-focused model which is carried out in three cycles with two meetings can improve the quality of teachers to overcome learning gaps in the classroom. Interaction during clinical supervision with a solution-focused model, the principal stimulates the teacher with discussions and triggering questions so that the teacher understands the condition of the students in the class and can determine the appropriate solution. This clinical supervision is carried out on teachers so that it has an impact on learning outcomes and student motivation. The process of carrying out clinical supervision from the initial meeting stage, the observation stage, and the return meeting stage is carried out by the principal of the teacher to overcome learning gaps and student learning gaps. Efforts made by the teacher to overcome student learning gaps in the classroom are to understand the condition of students, determine learning methods, and appropriate media for teaching and learning activities. The teacher carries out mentoring and grouping students in class according to the results of discussions with the school principal during the supervision meeting. So the teacher explores adjusting the cognitive-social conditions of students. This reflects that supervision can provide impetus to develop mastery of teaching and learning conditions towards a better state.

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