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| RESEARCH ARTICLE

Clinical Supervision in Education: A Formative Framework for Enhancing Instruction and Professional Development

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| ABSTRACT
Pursuing professional development is a fundamental goal for every teacher. This can be achieved through various avenues, including attending and participating in conferences, workshops, and seminars, conducting action research, or engaging in peer observation, among others. Within this process, supervision also plays a fundamental role. Traditional educational supervision models were predominantly summative, primarily focusing on controlling teachers and making judgmental decisions about their performance. However, the limitations of this approach created a need for a more formative model, leading to the development of clinical supervision. Accordingly, it is the intent of this paper to underscore the significance of this approach to supervision in the field of education, focusing on its theoretical tenets that serve as a foundation for enhancing the quality of instruction. This paper stresses the formative nature of clinical supervision through adopting a cyclical approach encompassing five key phases: the pre-observation conference, classroom observation, analysis, post-observation conference and post-conference analysis. By so doing, clinical supervision prioritises the enhancement of quality instruction and supports teachers' professional development, rather than identifying faults or issuing criticism.

| KEYWORDS
Clinical supervision, educational supervision, professional development, supervisory cycle

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Introduction

Educational supervision was traditionally considered a tool for overseeing and controlling teachers to ensure their respect for the rules and regulations (Caspi & Reid, 2002; Daresh, 2001; De Grauwe, 2007; Glickman et al., 2017; Zepeda & Glanz, 2016). This perspective, however, has been criticised for neglecting the role of supervision in enhancing the quality of teaching practices (Gebhard, 1990; Goldsberry, 1988; Sullivan & Glanz, 2013). Furthermore, it was judgemental in nature as it was grounded in a traditional view of teacher evaluation which was unsuccessful in providing credible and accurate data on the effectiveness of instruction (Weisberg et al., 2009). More than that, the traditional perspective on supervision overlooked teachers' professional development. On this account, several models of supervision have been developed. Each has its unique view of what effective supervision should be. Accordingly, this paper aims to highlight one of the most significant models of supervision, namely clinical supervision, which primarily focuses on promoting instruction and teachers' professional development.

This paper seeks to provide an overview of the genesis of the clinical supervision model and its tenets. Emphasis is also placed on the phases involved in implementing this model. Another critical area addressed in this paper is the connection between clinical supervision and professional development. The connection between the former and teacher evaluation, including its two major types, is also of equal importance. The last section spotlights the key characteristics of effective supervisors, which are identified by various scholars and aligned with the framework discussed in this paper.

Overview of Clinical Supervision

Clinical supervision was developed by Morris Cogan and Robert Goldhammer in the 1960s at Harvard University (Caruso & Fawcett, 2007; Marzano et al., 2011; Zepeda, 2017). During its genesis, the goal of this model was to assist "graduate student interns in improving their teaching of children who were attending summer school" (Caruso & Fawcett, 2007, p. 109). Later, however, it was used by administrators as a basis for evaluating the performance of teachers. The inception of clinical supervision coincided with the spread of the belief that ensuring the quality of instruction through collaboration between supervisors and their supervisees (i.e., teachers) was necessary.

The clinical supervision approach refutes the effectiveness of inspectional practices that aim to identify deficiencies in teachers' practices rather than rectify them. Moreover, the supervisor-teacher relationship is deemed crucial (Caruso & Fawcett, 2007; Marzano et al., 2011; Zepeda, 2017). This relationship is described as collegiality because it fosters teacher productivity, thereby challenging the notion of the supervisor's superiority. Although several other models of supervision emerged, clinical supervision is still widely adopted in the twenty-first century (Caruso & Fawcett, 2007). This can be ascribed to its emphasis on the significance of the staff's professional development. Gall and Acheson (2010) asserted that clinical supervision is directed towards the professional growth of the teacher. In addition, they pointed up four main objectives of this model, viz.:

- Providing the teacher with objective feedback;
- Suggesting solutions to teaching problems;
- Improving the teacher's skills;
- Evaluating the teacher's performance.

Teachers, according to the clinical supervision model, are no longer passive, for they assume the responsibility for improving the quality of their practices with the help of supervisors or peers. In this regard, Zepeda (2017) argued, "When teachers learn from examining their own practices with the assistance of peers or supervisors, their learning is more personalised and therefore more powerful" (p. 55). Further, it is worth noting that this model of supervision can take two forms: individual and group clinical supervision. The teacher can be supervised individually by a supervisor or collaborate with other teachers in the interest of growing professionally, with or without the supervisor's help.

Phases of Clinical Supervision

There are five phases of clinical supervision (Caruso & Fawcett, 2007; Marzano et al., 2011). These phases are interconnected and form a cyclical process. The aim of this five-stage process is the involvement of the teacher and the supervisor in reflective confabulations. The first stage of the clinical supervision cycle is the pre-observation conference. This refers to an initial meeting between the supervisor and the teacher, often held 24 to 48 hours before the beginning of the second stage. This meeting serves as an opportunity to establish a positive working atmosphere in which the roles of the participants are explained. This conference is a preparatory stage that enables the supervisor and the teacher to confer on the objectives and procedures of the upcoming lesson and agree on how observation will take place.

After the pre-observation conference, classroom observation takes place. During this second stage, the supervisor observes the teacher presenting a lesson. The focus of the supervisor is on those aspects that were agreed upon during the initial conference. Classroom observation serves as a tool for gathering data that will be used in the third stage of the clinical supervision cycle. McGreal (1983, as cited in Zepeda, 2017) opined that narrowing the scope of observation is more effective because it helps the observer (i.e., the supervisor) focus on specific elements that will, in turn, serve as good sources of data for analysis. The effect of the data collected, they added, hinges on the methods used in this process.

Zepeda (2017) enumerated various methods of data collection. The checklist is one of the methods of gathering observational data. Supervisors often use a standardised checklist that helps in the identification of teaching behaviours and activities and their classification as absent, present or needing improvement. Others, nevertheless, may prefer to adapt, rather than adopt, or design their own checklists. Another tool for collecting data is the selected verbatim notes. This requires recording interactions, questions or words as they were stated exactly. With advances in technology, in addition, gathering observational data has become easier today. Audiotaping and videotaping have become common methods that can facilitate the task of the supervisor to gather data for analysis.

The third stage of clinical supervision is analysis. The data collected during the previous phase is invaluable, for it serves as the basis for the preparation for the fourth stage after analysis. This data is used to reconstruct the events that happened during the lesson with the intent of identifying the teaching behaviours that were the primary concern in the first stage of the conference. It is worth mentioning that there is a tendency to engage in post-discussions right away after the presentation of the lesson, yet having more time to analyse the data would yield better outcomes since the supervisor will be able to organise the data very well, and the teacher will have the chance to reflect on the lesson and get prepared for the post-conference, being, thus, an active participant in the evaluation process (Caruso & Fawcett, 2007; Marzano et al., 2011).

After the analysis of observational data, the need for the post-observation conference, the fourth stage of the cycle, arises. In the literature, this stage is also known as the supervision conference (Caruso & Fawcett, 2007; Marzano et al., 2011). Zepeda (2017) claimed that

> teachers learn by examining data that reflect their classroom practices. If appropriately and accurately presented in the post-observation conference, these data can help teachers see and hear their practices and the effect of these practices on student learning. Adults need to be able to construct meaning by reconstructing the events of the classroom; the data collected in the classroom observation provide the building blocks for teachers to assemble and reassemble knowledge with the assistance of the supervisor. . . . Teachers need the supervisor's feedback to improve their practices. Worst-case scenarios include the [supervisor] who leaves a note . . . without any follow-up discussion. Regardless of its type (formal or informal), a classroom observation without the post-observation conference is a form of leadership malpractice. (p. 300)

Zepeda held the view that the post-observation conference is a very critical stage in the cyclic process of supervision. According to them, it serves as a good opportunity to raise the teachers' awareness of what was going on in the classroom and critically reflect on their practices with the help of the supervisor, whose feedback is fundamental in this process. The data gathered in the second stage helps frame the supervisor's feedback.

The way feedback is offered is highly significant. It can be either constructive or destructive. The former type of feedback is more appreciated by teachers and has more fruitful outcomes. The intent of the supervisor, hence, should be to give teachers objective feedback that aims to improve instruction and promote professional growth rather than to look for their faults and criticise them. Destructive feedback may be wrongly interpreted as a means to disparage teachers, and it may stress the hierarchical relationship between participants, thereby violating one of the tenets of the clinical supervision model, i.e. the establishment of a positive bond between the supervisor and the teacher.

The fifth stage in the process of clinical supervision is referred to as the post-conference analysis (Caruso & Fawcett, 2007) or analysis of the analysis (Marzano et al., 2011). While the post-observation conference stage is of great importance to the teachers who are actively involved in the process of evaluation, the post-conference analysis is of the utmost importance to supervisors (Marzano et al., 2011). The latter, through this stage, can reflect on their practice and evaluate its effectiveness to improve it. Further, it is an occasion for both the supervisor and the teacher to confer with each other on the way the post-conference took place, to assess their satisfaction with the nature of communication and the roles each played during this conference and to examine the extent to which the main objectives have been attained (Caruso & Fawcett, 2007).

In sum, the clinical supervision model is developed with the intent to promote lifelong learning. Teachers are learners who should be accompanied by supervisors throughout their learning journey. This would not be successful without a plan. On this account, the five-phase process has been developed by the pioneers of this model, namely Cogan and Goldhammer. The five phases, nevertheless, are not deemed an end but a vehicle to help teachers, as well as supervisors, continue learning and, thus, grow professionally through a cyclical process.

Clinical Supervision and Professional Development

Although the genesis of clinical supervision dates back to the 1960s, it has been widely implemented as a model for supervising teachers. Cogan and Goldhammer developed a perspective of supervision that could cope with the changing demands of the teaching profession. The model's success lies in its ability to provide a framework that helps in the enhancement of teaching practices and the promotion of teachers' professional growth (Gall & Acheson, 2010; Marzano et al., 2011; Zepeda, 2017). As noted by Caruso and Fawcett (2007), clinical supervision is still adopted in the twenty-first century.

Clinical supervision, as noted earlier, is based on a five-stage cyclical process. The completion of the cycle enables the supervisor and the teacher to highlight areas that need improvement. To achieve this purpose, developing a professional growth plan can be very beneficial. In this regard, Zepeda (2017) suggested some of the activities that the supervisor and the teacher may agree to have recourse to after the post-observation conference, including:

- Attendance of conferences, workshops and seminars;
- Peer observation;
- Conducting action research collaboratively with another peer;
- Development of a portfolio;
- Enrolment in graduate courses;
- Exploration of different resources.

Little (1982, as cited in Caruso & Fawcett, 2007) asserted that for continuous professional growth to take place, teachers should be provided with opportunities to reflect on and discuss their teaching practices and to collaborate with others to enhance the quality of instruction. Those conditions can be fulfilled by the clinical supervision model. One more advantage of this model is its intent to foster the culture of working in a community and collegiality. This, undoubtedly, helps to establish a positive working atmosphere where trust and confidence are highly significant.

It is also significant to note that every teacher (or perhaps every group of teachers) has specific needs. According to Creemers et al. (2013), there is a need for a dynamic approach to professional development that takes into consideration those varying needs. The tenets of the clinical supervision model are consistent with the view of Creemers et al., for it seeks to improve the quality of instruction through adopting a differentiated approach that focuses on the teacher's needs on an individual basis.

Through its cyclical process, this model attempts to identify the teacher's priorities for improvement based on the observational data gathered and suggest a suitable professional development plan.

Clinical Supervision and Teacher Evaluation

In this paper, the inherent connection between educational supervision and teacher evaluation was posited. Range et al. (2011) and Zepeda (2006) indicated that supervision and evaluation complement each other. Haefele (1992) and Wanzare (2002) asserted that evaluation is a very essential stage in the assessment of the quality of instruction. In the literature, evaluation has been defined in different ways. Generally, the term refers to the process whereby data is gathered and used in the interest of measuring the quality of something (Daresh & Playko, 1995). According to Drake and Roe (1999), this process is reflective in nature and requires the use of informal or formal means to make decisions. In its narrowest sense, Koinange (1980) defined teacher evaluation as a diagnostic process which seeks to measure the teacher's performance with the help of an evaluator.

Two types of evaluation have been distinguished in the literature, summative and formative (Wanzare, 2002; Zepeda, 2017). The aim of the former type of evaluation is to make judgements about the teacher's performance (Beach & Reinhartz, 2000). Likewise, Gullatt and Ballard (1998) defined summative evaluation as "a judgmental decision of the quality and worth of an individual teacher over a special time frame" (p. 13). In their definition, Gullatt and Ballard highlighted the significance of the time frame, which Beach and Reinhartz neglected. The second type of teacher evaluation is formative evaluation, also known as developmental evaluation. Acheson and Smith (1986, as cited in Wanzare, 2002) defined this type as the process of diagnosing the teacher's practices to highlight those areas that need to be improved and suggest solutions. In addition to improving instruction, this process, they added, attempts to promote the professional growth of teachers.

Although teacher evaluation is a significant component of educational supervision, the way it is approached is very critical. The traditional view of supervision has been strongly criticised for being judgmental. Traditional approaches tend to adopt summative evaluation methods to judge the performance of the teaching staff. Because of this tendency, the teacher-supervisor relationship can be negatively influenced. In this regard, Zepeda and Ponticell (2019) argued that summative evaluation "elevates the evaluator's power over teachers, creating situations of both fear and coercion" (p. 18).

Conversely, formative approaches to supervision have been corroborated to be more advantageous (Zepeda & Ponticell, 2019). Hence, the clinical supervision model adopts a formative view of educational supervision. This model follows a cyclical process that enables the identification of teachers' needs and the rectification of their practices rather than judging the quality of instruction in a specific period. Clinical supervision, furthermore, emphasises the enhancement of teachers' professional growth. This claim is consistent with that of Range et al. (2011) in which they stated that supervision should be viewed as a formative process that attempts to promote the professional growth of the teacher.

Zepeda and Ponticell (2019) pointed out the role of formative approaches to supervision in promoting collaborative work among participants. This matches one of the basic principles of clinical supervision. Supervisors have to engage teachers actively in the process of supervision. Teachers are also encouraged to work with peers in communities to help each other grow professionally. Further, Zepeda (2017) asserted that formative approaches to educational supervision do not depend only on classroom observation. This perspective is strongly supported by the clinical supervision model, which fosters the use of various methods to ensure the professional growth of the teaching staff, including, for example, conducting action research and developing portfolios.

Characteristics of Effective Supervisors

Effective supervision has been the central concern of education since the rise of reforms that rejected the traditional perspective of supervision. Supervisors are said to play a significant role in the success of the mission of supervision. In the literature, several characteristics of effective supervisors have been distinguished (Caruso & Fawcett, 2007; Marzano et al., 2011; Zepeda, 2017). In this section, the focus is on those features that match the orientation of the clinical supervision model.

Effective supervisors are claimed to be able to respond to teachers' needs so as to help ameliorate the quality of instruction (Sullivan & Glanz, 2013). According to Marzano et al. (2011), "the purpose of supervision should be the enhancement of teachers' pedagogical skills, with the ultimate goal of enhancing student achievement" (p. 2). This implies that supervisors should not isolate the needs of teachers. Instead, they should be able to match them with those of learners because the ultimate goal of instruction is learning.

Zepeda (2017) indicated that the success of supervision lies in its ability to engage teachers in a positive learning environment in which they are considered active learners. To put it differently, effective supervisors should not endeavour to play the most prominent part in the supervision process; instead, they have to strive to make the whole process a learning opportunity for the teacher. Moreover, they pointed out that effective supervision is an ongoing process which does not stop at the stage of the post-observation conference, so "effective supervisors [have to] seek ways to keep the momentum for learning from one cycle of supervision to the next" (p. 313).

Another key feature of effective supervisors that Zepeda (2017) highlighted is their ability to connect supervision, evaluation and professional growth of teachers. The latter should be the major concern of supervision and evaluation. In the same vein, numerous studies have shown that there is a significant relationship between effective supervision and teachers' professional

growth (Nolan & Hover, 2008; Tesfaw & Hofman, 2012). Therefore, effective supervisors should adopt a supervisory model, like clinical supervision, that gives priority to the enhancement of teachers' growth.

The supervisor-teacher relationship is said to be vital in the process of educational supervision (Caruso & Fawcett, 2007; Marzano et al., 2011). Effective supervisors need to establish a positive relationship with teachers. In doing so, they can manage to boost teachers' trust and confidence, which, in turn, will enhance the quality of instruction. In Zepeda's (2017) view, collegiality between the supervisor and teacher is a prerequisite for maintaining a bond between them and for supervision to be efficacious. Additionally, Glickman et al. (2013) stated that effective supervisors should be knowledgeable and technically competent to assist teachers successfully.

Conclusion

Enhancing instruction and teacher development at the professional level is of utmost importance in education. Various methods can help achieve this goal, including educational supervision. Traditional models were judgmental in nature, considering supervision, or rather inspection, a means to control instruction and identify teachers' faults. This necessitated a more formative approach to supervision that seeks to improve instruction and ensure the professional development of the teaching staff. Accordingly, this paper aimed to underscore the significance of the clinical supervision model by providing a comprehensive overview of its tenets. Emphasis was placed on how this supervisory model helps enhance the quality of instruction without compromising their professional development. To this end, reference was made to the phases of the cyclical process of educational supervision, namely the pre-observation conference, classroom observation, analysis, post-observation conference, and post-conference analysis. Moreover, this paper sought to establish the relationship between clinical supervision and teacher evaluation, stressing the formative nature of this framework. A summary of the key characteristics of effective supervisors, which are in congruence with the principles of clinical supervision, has also been provided. In short, the purpose of this paper was to highlight the major strengths of the clinical supervision model, taking into account the existing literature in the field of educational supervision, particularly enhancing the quality of instruction and professional development by redefining the roles of the supervisor and instructor.

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