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# CLINICAL SUPERVISION AS A STRATEGY TO ENHANCE TEACHER PROFESSIONALISM: A QUALITATIVE STUDY AT SDN 1 KALIPANG, REMBANG

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#### **ABSTRACT**

This study aims to describe and analyze the implementation of clinical supervision as a strategy to enhance teacher professionalism at SD Negeri 1 Kalipang, Sarang District, Rembang Regency, Central Java, Indonesia. Using a qualitative approach with a case study method, data were collected through indepth interviews, observations, and documentation. The research involved four participants, consisting of one school principal and three teachers who were directly engaged in the supervision process. The findings show that clinical supervision was systematically implemented through three phases: preobservation meeting, classroom observation, and post-observation reflection. This process fostered professional dialogue, strengthened pedagogical competence, and improved classroom practices. Teachers reported feeling more appreciated, motivated to grow, and open to feedback. Clinical supervision also promoted collaborative work culture and continuous learning. The study concludes that consistent application of clinical supervision is an effective strategy to empower teachers, cultivate reflective professionalism, and improve the overall quality of education in elementary schools.

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## INTRODUCTIONS

Teacher professional competence is one of the key components in determining the quality of education. According to Law No. 14 of 2005, reinforced by Government Regulation No. 19 of 2005, teachers are required to possess four core competencies: pedagogical, personal, social, and professional. Professional competence includes the ability to master subject matter, design, implement, and evaluate learning effectively, focusing on student needs (Kemendikbudristek, 2023). This aligns with the Regulation of the Director General of Teachers and Education



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Personnel (GTK) No. 2626/B/HK.04.01/2023, which emphasizes that broad and deep subject matter mastery is the foundation of professional competence.

Teacher professional competence has a significant influence on the success of the learning process (Subekti & Sukmawan, 2021). A professional teacher is not only able to master the subject matter but also integrates knowledge, attitudes, and skills into the learning process (Sari, 2022). Therefore, the improvement of professional competence must be conducted continuously through training, workshops, and other self-development activities that are adaptive to current developments (Artha et al., 2021).

However, in practice, there remains a gap between regulation and implementation. At SD Negeri 1 Kalipang Rembang, teachers have not fully succeeded in designing and implementing student-centered learning. The School Self-Evaluation (EDS), Education Report Card, and supervision results indicate that teacher professional competence is still below standard.

 Table 1. Teacher Professionalism Indicator Achievement in the Education Report Card of

SD Negeri 1 Kalipang Rembang (2024)

Indicator	Achievement (%)	Minimum Standard (%)	Indicator
Classroom Management	79.71	85	Classroom Management
Psychological Support	74.34	85	Psychological Support
Learning Methods	72.30	85	Learning Methods

Source: Education Report Card of SDN 1 Kalipang Rembang, 2024

These findings are reinforced by supervision results indicating that teachers still face difficulties in: (1) Developing learning materials from various relevant sources, (2) Applying active and innovative learning methods, and (3) Managing the classroom and objectively assessing learning outcomes.

Several factors contributing to the low level of teacher professionalism include lack of awareness and a collaborative culture among teachers, minimal ongoing training, limited facilities, weak principal involvement in academic supervision, and insufficient intrinsic and extrinsic motivation (Utami & Mahfud, 2020; Pratiwi, 2023). In fact, school principals play a crucial role as instructional leaders who should be capable of guiding and fostering teachers through effective supervision strategies.

In this context, clinical supervision becomes a relevant approach to enhance teacher professional competence. Clinical supervision is a mentoring process based on observation and reflection conducted collaboratively between the supervisor and the teacher, with stages including pre-observation meetings, observation, and post-observation conferences (Abdullah & Soegeng, 2020). This approach emphasizes open communication, constructive feedback, and teacher awareness of professional development needs.

At SD Negeri 1 Kalipang Rembang, out of 8 actively teaching teachers, 3 voluntarily participated in clinical supervision. This participation reflects a growing awareness and commitment to improving teaching quality. Such supervision is expected to become an effective and sustainable mentoring model to enhance classroom teaching quality (Wijayanti & Gunawan, 2022).

Previous studies by Artha et al. (2021) highlight the importance of teacher training management in five stages: planning, organizing, implementation, supervision, and evaluation. However, limited research has specifically explored clinical supervision as a strategy to enhance professional competence at the elementary school level. Therefore, this study is considered important and relevant to address the current challenges in schools.

Professional competence is one of the four main competencies that teachers must possess, as stipulated in the Regulation of the Director General of GTK No. 2626/B/HK.04.01/2023. This competence refers to the teacher's ability to master subject matter broadly and deeply, define learning objectives, and organize content focused on students (Kemendikbudristek, 2023). Febriana (2021) states that professional competence is the educator's ability to master subject matter comprehensively, enabling them to guide students in understanding the material being taught. Wuisan et al. (2024) add that professional competence includes the integrated application of knowledge, attitudes, and skills, along with responsibility and commitment to learners. Aspects of professional competence include: (1) mastery of



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subject content and teaching methods, (2) understanding student characteristics, and (3) understanding and implementing the curriculum effectively (Kemendikbudristek, 2023).

Improving professional competence must be carried out through systematic and continuous strategies. Fauzi (2020) outlines several steps principals can take as supervisors to improve teacher competence through clinical supervision: (1) Identifying teacher needs through open dialogue to determine mentoring areas, (2) Joint planning such as agreeing on supervision focus, observation techniques, and indicators, (3) Objective classroom observation without interfering with the learning process, (4) Data analysis from observations to identify strengths and weaknesses, (5) Feedback meetings to provide constructive input, (6) Reflection and teacher empowerment to raise awareness of developmental needs, (7) Follow-up mentoring including training, coaching, or mentoring, and (8) Ongoing professional development through participation in training, KKG, and other professional forums.

Table 2. Areas for Improvement and Strategies to Enhance Teacher Professional Competence

No	Professional Competency Aspect	Area for Improvement	Enhancement Strategy	
1	Learning material development	Materials not aligned with latest curriculum and scientific trends	Attend curriculum training, read updated references, use digital materials	
2	Classroom management	Classroom atmosphere not conducive	Establish rules, use positive approach, apply differentiation strategies	
3	Learning methods	Still lecture-based, low student engagement	Implement PBL, discovery learning, cooperative learning	
4	Assessment of learning outcomes	Overly focused on written tests	Apply authentic assessment: projects, portfolios, observations	
5	Professional development	Minimal ongoing development	Actively join KKG, online/offline training, professional forums	

Source: Adapted from Fauzi (2020)

Clinical supervision is a guidance process focused on improving teacher professionalism through a collaborative and reflective approach based on real classroom observations (Abdullah & Soegeng, 2020). This intensive supervision aims to reduce the gap between actual and ideal teaching behaviors (Shalihin et al., 2023). According to Siswanto et al. (2021), clinical supervision is part of instructional supervision that emphasizes diagnosing teaching weaknesses for immediate improvement. Sulistyorini et al. (2021) explain that clinical supervision is carried out in three systematic phases: (1) Pre-observation meeting, (2) Observation, and (3) Post-observation meeting.

The key characteristics of clinical supervision include (Rohmatika, 2018): (1) Initiated by the teacher, (2) Observation focus based on mutual agreement, (3) Collaborative and reflective in nature, (4) Aimed at changing teaching behavior through reinforcement and feedback. The principles of clinical supervision include a partnership between teacher and supervisor, openness in addressing issues, focus on the teacher's professional needs, and non-judgmental feedback (Sahertian in Rohmatika, 2018).

Clinical supervision comprises three implementation dimensions: (1) Preliminary Stage, which includes: (a) Establishing rapport, (b) Determining observation focus, and (c) Deciding on techniques and tools for observation. (2) Observation Stage, which involves: (a) Non-intrusive classroom observation, (b) Objective note-taking based on prior agreement, (c) No direct evaluation. (3) Post-Observation Meeting, which includes: (a) Providing reinforcement and feedback, (b) Discussing observation results, and (c) Formulating follow-up agreements.

Table 3. Differences Between Academic Supervision and Clinical Supervision

No	Aspect	Academic Supervision	Clinical Supervision
1	Objective	To improve general learning process	To enhance individual teacher competence
2	Approach	General, formal	Individualized, reflective
3	Focus	Planning and evaluation	Analysis of teaching practice

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4	Relationship	Evaluative	Partnership
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5 Instrument Standardized Tailored to teacher's needs

Source: Rohmatika (2018)

Although previous studies have discussed the importance of clinical supervision in improving teacher competence (e.g., Nurasiah, 2020; Imelda, 2020; Sunardi & Satori, 2023), most have focused on general contexts or secondary education levels, often using descriptive approaches without deeply exploring the reflective and collaborative dynamics between principals and teachers. This study occupies a distinct position by emphasizing clinical supervision as a transformational strategy at the elementary school level, and by analyzing its implementation holistically through a dialogic and participatory lens. It addresses a gap in the literature by systematically examining how clinical supervision impacts teacher professionalism through data-based reflection, strengthened professional relationships, and the development of a collective learning culture within the school. Therefore, the claim of "limited research" is not merely asserted but substantiated by the lack of studies that critically connect the technical dimensions of clinical supervision with meaningful changes in instructional behavior at the elementary level.

# **METHOD**

This study employed a qualitative approach with a case study design. This approach was chosen because it allows the researcher to understand and explore in depth the phenomenon of clinical supervision implementation in improving teachers' professional competence at SD Negeri 1 Kalipang Rembang. The case study is considered appropriate for analyzing processes, social interactions, and dynamics occurring in real school contexts (Yusriani, 2022). According to Creswell (2015), a qualitative approach provides researchers with the opportunity to explore social phenomena in a natural context holistically. The case study was selected because it enables the researcher to comprehensively capture the practice and impact of clinical supervision within a specific school setting.

The study was conducted at SD Negeri 1 Kalipang, Sarang Subdistrict, Rembang Regency. The research site was selected purposively because the school had systematically implemented a clinical supervision program. The research process involved initial observations, data collection, data analysis, data validity testing, and the preparation of the research report.

The subjects of this study consisted of one school principal and three teachers, selected through purposive sampling. This technique was used because the selected subjects were directly involved in the clinical supervision process, and therefore considered capable of providing relevant and in-depth information. Arikunto (2020) states that in qualitative research, subjects are selected based on research objectives and specific considerations related to understanding the phenomenon being studied. Similarly, Riduwan (2020) emphasizes that the selection of key informants in qualitative research is based on their ability to explain the phenomenon in depth.

The primary instrument in this study was the researcher, as in qualitative research, the researcher serves as the key instrument in data collection (Sugiyono, 2021). To support the data collection process, additional instruments such as interview guidelines, observation sheets, and documentation checklists were also used. The three main techniques for data collection were interviews, observations, and documentation. In-depth interviews were conducted using structured interview guidelines. Observations were carried out in a participatory manner during the clinical supervision process, while documentation was gathered from lesson plans (RPP), activity photos, meeting notes, and evaluation sheets.

Table 4. Summary of Data Collection Techniques

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No	Sub-focus	Technique		Physical Evidence		
1	Initial supervision meeting	Interview,	Observation,	Interview notes, lesson plans,		
		Document		attendance, photos		
2 1	Learning observation	Interview,	Observation,	Observation notes, schedules,		
		Document		observation sheets		
3	Final supervision meeting	Interview,	Observation,	Meeting minutes, evaluation sheets,		
		Document		follow-up plan		

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Data analysis in this study was carried out using the interactive model by Miles and Huberman, which includes four stages: data collection, data reduction, data display, and conclusion drawing. This process was conducted simultaneously and continuously from the beginning of data collection until a valid and meaningful conclusion was reached. Ghozali (2021) emphasizes that qualitative data analysis must be conducted thoroughly to uncover the meaning behind the presented data. The researcher actively interpreted the data and connected it to the field context. The researcher actively interpreted the data and connected it to the field context.

To enhance the rigor of data analysis in this qualitative case study, a thematic analysis framework was employed by organizing the findings into a structured thematic matrix. This matrix included key dimensions, indicators, representative quotations from participants, and the interpreted meanings or conclusions derived from the data. By systematically categorizing data in this way, the study ensured transparency and traceability of meaning construction, which is crucial in qualitative research. The thematic matrix served as an analytical tool that bridged raw field data with conceptual insights, allowing for a more nuanced interpretation of how clinical supervision practices influenced teacher professionalism. A sample of this thematic matrix is presented in Table X to illustrate the analytical logic used in deriving the study's conclusions.

To ensure data validity, source and method triangulation techniques were employed. Source triangulation was conducted by comparing information from the school principal and teachers, while method triangulation was carried out by comparing the results of interviews, observations, and documentation. Sugiyono (2021) explains that triangulation is a data validity checking technique that uses sources outside the data itself for verification or as a comparison to the data. Through the application of triangulation, the data obtained can be justified in terms of validity and reliability.

## RESULT AND DISCUSSION

#### Result

This research was conducted at SD Negeri 1 Kalipang, Sarang Subdistrict, Rembang Regency, involving six classroom teachers and two subject teachers. The implementation of clinical supervision was carried out by the school principal through a collaborative and reflective approach aimed at enhancing teachers' professional competence. This process consisted of three key stages: pre-observation meeting, classroom observation, and post-observation meeting.

# **Teachers' Professional Competence**

Based on the school's self-evaluation and the 2024 Education Report Card, the professional competence of teachers at SD Negeri 1 Kalipang remains below the minimum standard of 85%. Three main indicators of concern include classroom management (79.71%), provision of psychological support to students (74.34%), and the ability to apply active learning methods (72.3%).

The supervision findings revealed that some teachers still struggle with designing contextual lesson plans that align with students' needs. Effective and participatory classroom management has not been fully realized, as indicated by the limited variety of teaching methods, low student engagement in class discussions, and suboptimal time management. In terms of content mastery, several teachers have yet to integrate learning materials with advances in science and technology effectively.

The contributing factors to the low professional competence include limited teacher awareness of the importance of continuous self-development, a weak culture of peer collaboration, limited access to relevant training and workshops, and suboptimal support from the principal in the form of regular and meaningful academic supervision. Moreover, the lack of incentives or recognition for teachers' professional performance has also impacted their internal motivation for improvement.

On the other hand, some teachers have shown initiative in self-development through online training, participation in teacher learning communities, and adopting simple technology-based innovations such as instructional videos and digital quiz apps. However, these best practices remain uneven and require reinforcement through targeted supervision.

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## **Implementation of Clinical Supervision**

Clinical supervision was implemented by the school principal using a dialogic, collaborative, and supportive approach. This process fostered a sense of safety and mutual trust between teachers and the principal. The three key stages were systematically carried out as follows:

The first stage, the pre-observation meeting, aimed to establish positive communication between the principal and teachers. During this stage, the principal facilitated open discussions regarding classroom learning conditions, challenges faced by teachers, and desired outcomes of supervision. Teachers were given the opportunity to present their lesson plans or teaching modules, which were then jointly reviewed with the principal in terms of planning components, learning objectives, strategies and methods, and the appropriateness of media and assessment tools. The meeting was conducted in a friendly, non-didactic atmosphere, allowing teachers to feel respected and heard. The focus of observation, observation indicators, and technical implementation of classroom observation were also agreed upon collaboratively. One teacher expressed, "In the first meeting, I felt like my ideas were truly listened to. The principal didn't dominate, but rather discussed and asked for my input as an equal." (Teacher 1).

The second stage, classroom observation, was conducted at a mutually agreed time using a non-intervention approach. The principal entered the classroom without disrupting the learning process and positioned themselves unobtrusively, typically in a corner. Observation was guided by an instrument previously developed with the teacher, containing key indicators such as student engagement, variation in teaching methods, time management, and teacher-student interaction effectiveness. During the process, the principal objectively recorded the teacher's instructional behavior and student responses without providing interruptions or immediate evaluations. Teachers taught naturally and without pressure, indicating a supportive and non-intimidating relationship with the principal.

The third stage, the post-observation meeting, served as a vital forum for collaborative reflection. The principal and teacher sat together to discuss observation results in a dialogic and respectful manner. The principal began by appreciating the strengths and highlights of the teacher's instructional performance before addressing areas for improvement. Reflection was based on observation data and field notes rather than assumptions. The discussion was two-way and open, resulting in a jointly developed and measurable Follow-Up Action Plan (RTL), such as improving teaching methods, developing instructional media, or strengthening classroom management. "What I appreciated most was the feedback—it wasn't just what I did wrong, but also what I did well, and how I could improve without feeling judged," said one teacher (Teacher 2). Observation data was kept confidential to foster trust, and the RTL became a shared commitment for continuous improvement.

The implementation of clinical supervision at SD Negeri 1 Kalipang demonstrated high effectiveness in enhancing teacher professionalism. All three stages were conducted systematically, participatively, and humanely. The principal acted as a learning partner who fostered reflection, improvement, and ongoing collaboration, directly impacting the quality of teaching and learning.

## **Discussion**

This study revealed that the systematic and dialogic implementation of clinical supervision by the principal of SD Negeri 1 Kalipang positively impacted the enhancement of teacher professionalism. Supervision was carried out through three main stages: pre-observation meeting, classroom observation, and post-observation meeting. Throughout the process, teachers were actively involved, heard, and received constructive, data-based feedback. Findings also indicate that although some teachers still face challenges in classroom management, active learning methods, and content mastery linked to technology and science, the clinical supervision approach proved effective in promoting reflection and continuous improvement.

Clinical supervision, in this context, functions not merely as a control mechanism but as a platform for teacher empowerment. The process emphasized dialogue, empathy, and collaboration—contrasting sharply with conventional, top-down supervisory models. The principal acted as a coach and critical friend rather than a mere

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evaluator. This aligns with Glickman et al. (2018), who state that clinical supervision is an approach that focuses on improving instructional quality through cooperative efforts between supervisors and teachers.

The findings regarding teachers' low professional competence in classroom management and active learning highlight an urgent need for more contextualized capacity building. The low performance indicators also suggest that professional development is not yet systematically embedded in the school culture. This study emphasizes the importance of internal school support, particularly through academic supervision that is not only regular but also meaningful and tailored to teachers' needs. Meanwhile, the emergence of teacher initiatives in online training and technology-based instruction indicates a bottom-up potential for change. However, these initiatives remain limited due to the lack of supportive ecosystems, such as peer learning forums and performance-based incentives. Thus, clinical supervision serves as both a catalyst and reinforcer of sustainable teaching practice transformation.

According to Asyifah, Suryaningsih, and Nurman (2022) in the *Journal of Islamic Studies*, clinical supervision consistently provides constructive feedback, enables teacher self-reflection, and fosters professional confidence in planning, methods, and evaluation—while cultivating a collaborative school culture. This aligns with findings in Kalipang, where collaboratively developed RTLs reinforced teacher learning communities and built a reflective, practice-sharing culture.

Nurasiah (2020) found that clinical supervision through the stages of pre-observation, observation, and post-observation effectively improved teachers' skills in syllabus and lesson planning, as well as overall instructional effectiveness. A similar pattern was applied in SD Negeri 1 Kalipang: teachers were given the opportunity to evaluate their plans with the principal, followed by objective, non-intervention observations, and concluded with joint reflections. This cycle facilitated teachers' identification of weaknesses and development of improvement strategies.

In the article *Clinical Supervision in Enhancing Teacher Professional Competence* by Sunardi and Satori (2023), it was found that observation-, evaluation-, and coaching-based clinical supervision helps teachers identify strengths and weaknesses, improve lesson planning, instructional implementation, and learning assessment, and builds collaborative relationships that motivate professional growth. The findings from Kalipang reinforce this: reflection based on observational data strengthened both teacher professionalism and motivation.

At a vocational school in West Jakarta, research by Emilia Sari (2020) demonstrated a direct positive influence of clinical supervision and teacher self-efficacy on pedagogical competence. At SD Negeri 1 Kalipang, feelings of being appreciated, engaged in dialogue, and recognized for their strengths contributed to teachers' self-efficacy. This self-efficacy significantly influenced their active participation in reflection and implementation of follow-up actions.

Imelda (2020), in the *Jurnal Ilmiah Sekolah Dasar*, found that systematic clinical supervision (action research) increased teachers' instructional capabilities—from 65% in the pre-cycle to 82.6% by the second cycle. Kalipang showed a similar pattern: teachers who previously demonstrated limited use of active methods improved their instructional practices and classroom management through constructive feedback and coaching.

Although most literature indicates positive trends, several studies report challenges such as teacher readiness, time constraints, or limited understanding of supervision (e.g., Wahyuningsih, 2021, pandemic-era study in Semarang). Kalipang faced similar issues: an uneven collaborative culture, limited access to external training, and lack of formal incentives. Clinical supervision opened new spaces for professional growth, but broader and more consistent outcomes require systemic support: regular training, formal peer learning structures, and performance-based reward schemes.

Practically, this study demonstrates that a clinical supervision approach emphasizing open and reflective dialogue has created positive change: teachers feel heard, receive concrete feedback, and are motivated to improve their instructional methods and classroom management. However, sustaining and disseminating these best practices will require systemic steps: embedding academic supervision into school culture, integrating teacher communities of practice, providing relevant training, and establishing professional reward mechanisms.

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#### **CONCLUSION**

Based on the research conducted at State Elementary School 1 Kalipang, Sarang District, Rembang Regency, it can be concluded that clinical supervision implemented by the principal in a systematic manner through dialogical, collaborative, and supportive approaches has proven effective in enhancing teacher professionalism. The supervision process, consisting of three stages pre-observation conference, classroom observation, and post-observation conference was carried out participatively and based on data, thus creating a safe environment and fostering trust between the principal and the teachers. The findings indicate that teachers felt more appreciated and supported in recognizing both their strengths and weaknesses in teaching practices. Clinical supervision helped teachers improve lesson planning, diversify teaching methods, and strengthen classroom management and student interaction. However, internal school evaluation results and the 2024 Education Report data revealed that teachers' professional competence remains below the minimum standard of 85%. Three key indicators still requiring improvement include classroom management (79.71%), providing psychological support to students (74.34%), and the ability to implement active learning methods (72.3%). Some teachers still face challenges in designing contextual learning, managing classes in a participatory manner, and integrating instructional content with advances in science and technology. Contributing factors include low teacher awareness of the importance of self-development, weak collaborative culture among teachers, limited access to relevant training, and suboptimal academic supervision that lacks meaning and sustainability. Despite these challenges, several teachers have shown positive initiatives such as participating in online training, engaging in learning communities, and applying simple technologies in their teaching. These practices represent potential that can be further developed through clinical supervision focused on reflection and continuous improvement. Therefore, this study affirms that clinical supervision functions not merely as a monitoring tool but as an effective strategy to empower teachers, foster a reflective culture, and create a space for professional dialogue within schools. The success of clinical supervision implementation heavily depends on the principal's commitment to serving as a learning facilitator for teachers, as well as the school system's support for a collaborative culture and sustainable professional development.

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