

Clinical Supervision on the Professional Development of Teachers

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Abstract

This study examined the impact of clinical supervision on the professional development of teachers in Emilio Lee Llacer Sr. High School, San Jacinto District, Masbate, during School Year 2024–2025. It was anchored on Adult Learning Theory, Reflective Practice Theory, and Clinical Supervision Theory, with the view that clinical supervision is a formative, collaborative, and non-evaluative process that supports teacher growth through observation, feedback, and reflection. The study used a descriptive quantitative research design and employed a researcher-made questionnaire validated by experts and pilot-tested for reliability. Using purposive sampling, 15 public secondary school teachers who had experienced at least one cycle of clinical supervision were selected as respondents. Data were gathered through a structured survey and analyzed using frequency count, rank, percentage, weighted mean, and Pearson correlation. Findings showed that teachers experienced notable challenges in the implementation of clinical supervision, particularly limited time for meaningful feedback, lack of follow-up support, inconsistent practice, and unclear expectations. Despite these concerns, teachers agreed that clinical supervision positively affected their professional development, especially in constructive feedback, instructional planning, classroom management, teaching confidence, student engagement, and reflective practice. They also strongly perceived clinical supervision as highly effective in enhancing instructional skills, promoting collaboration, and improving classroom practices. The study concluded that clinical supervision remains a highly valued and effective developmental tool despite implementation issues. It recommends strengthening structured feedback and follow-up, improving supervisor training, and ensuring consistency and clarity in supervision procedures. This study aligns with SDG 4: Quality Education by supporting teacher quality and continuous professional development. Its sustainability impact lies in strengthening educational and institutional sustainability through improved instructional practice, reflective teaching, and supportive supervisory systems.

Keywords: Classroom Management, Clinical Supervision, Constructive Feedback, Instructional Skills, Professional Development, Reflective Practice, Teacher Confidence, Teacher Efficacy

1. Introduction

Clinical supervision is presented in the paper as a formative, collaborative, and non-evaluative approach to teacher development that uses pre-observation conferences, classroom observation, post-observation analysis, and reflective dialogue to improve instructional practice. Across the chapter, it is framed as a developmental alternative to fragmented training and punitive appraisal because it promotes reflective teaching, professional dialogue, teacher efficacy, and continuous growth. The study therefore examines how clinical supervision shapes the professional development of teachers, especially in settings where instructional improvement, teacher support, and school culture remain pressing concerns.

The reviewed literature consistently shows that clinical supervision contributes to teacher growth through better lesson planning, classroom management, student engagement, reflective practice, instructional competence, and self-efficacy. Teachers who experience structured and supportive supervision are reported to gain confidence, improve pedagogical strategies, and sustain motivation for professional learning (Anderson and Sweeney (2009), Glickman et al. (2018), Curtis and O'Connell (2013), Darling-Hammond et al. (2017), Furlong, Hagger, and Kennedy (2007), Killion & Harrison (2006), Tschannen-Moran and Hoy (2001)). The literature also stresses the importance of timely, specific, and actionable feedback, as well as collaborative supervisory relationships that support professional learning communities, teacher autonomy, and shared growth (Shute, 2008), (Hattie and Timperley (2007)), (Kraft, Blazar, & Hogan, 2018), (Vescio, Ross, & Adams, 2008), (Hargreaves, 2003), (Glickman, Gordon, & Ross-Gordon, 2018), (Ingersoll, 2001). Recent literature further expands the role of clinical supervision by linking it to technology-supported reflection, emotional support, culturally responsive practice, teacher leadership, and ongoing supervisor development. Digital tools, video-based reflection, and observation software are discussed as means to strengthen the feedback cycle and deepen reflection (Elliott, 2017), (van der Meij, 2015), (Dede, 2013), (Pellegrino, 2017). At the same time, the literature highlights the importance of empathy, burnout reduction, responsiveness to diverse classrooms, and leadership preparation (Beltman, Mansfield, & Price, 2011), (Gay, 2010), (Richmond & Foulger, 2014), (Katzenmeyer and Moller, 2001). However, the literature also identifies persistent

barriers, including lack of time, insufficient supervisory training, administrative workload, and resistance to reflective supervision when it is still perceived as evaluative rather than developmental (Costa & Garmston, 2002), (Feldman, 2016), (Glickman et al., 2018), (Hoque et al. (2020)), (Mahere (2018)). Across foreign studies, the paper shows that clinical supervision is most effective when implemented systematically and within a trust-based, collaborative framework. Studies from Ethiopia, Iran, Kenya, Zimbabwe, South Africa, Indonesia, Thailand, the Caribbean, Malaysia, and Ghana indicate that supervision strengthens reflective practice, pedagogical decision-making, learner-centered teaching, instructional leadership, and teacher competence (Tesfaw and Hofman (2014)), (Janani, Ahmadishokouh, and Samadi (2023)), (Karani (2020)), (Mahere (2018)), (Ngwenya (2020)), (Wiyono, Rasyad, and Maisyaroh (2021)), (Jon-Ega et al. (2020)), (Massiah and James (2020)), (Hoque et al. (2020)). Philippine studies similarly link supervision with instructional competence, teacher efficacy, coaching and mentoring, job performance, and improved supervisory support, while also showing that teacher or learner outcomes may depend on other contextual variables (Bello and Olaer (2020)), (Balaca (2023)), (Culajara and Culajara (2023)), (Reyes and Oropa (2025)), (Castillo (2024)), (Daigon and Alcopra (2024)), (Comighud, Futralan, and Cordevilla (2020)), (Quilala and Tantiado (2025)), (Busico (2020)), (Abuda (2021)), (Mendoza (2019)), (Oriente and Alvarado (2020)), (Go and Eslabon (2023)).

Globally, the study is situated within reform agendas that emphasize teacher quality, student achievement, and sustainable, practice-based professional development (Hattie, 2009), (OECD, 2019). The paper argues that clinical supervision aligns with these trends because it connects feedback and reflection directly to classroom realities and supports continuous instructional improvement. In this sense, clinical supervision is positioned not merely as a monitoring tool but as a strategic mechanism for school improvement and professional capacity-building. Nationally, the Philippine context is shaped by the Department of Education's reform efforts, the National Competency-Based Teacher Standards, the K-12 curriculum, School-Based Management, and LGU-supported teacher development initiatives. The paper explains that these national mechanisms reinforce the need for continuous teacher development and provide a policy environment in which clinical supervision can support shifts toward more student-centered teaching and collaborative professional learning (DepEd, 2007), (Pascual and Lee (2016)), (Panaligan (2019)), (Yap & Tan, 2015), (Mendoza & Carandang, 2018). Locally, the study is conducted in Emilio Lee Llacer Sr. National High School in San Jacinto District, Masbate, during School Year 2024–2025. It focuses on public secondary school teachers who have experienced at least one cycle of clinical supervision and examines how the frequency, quality, and components of supervision influence instructional competence, classroom management, collaboration, reflective habits, and lifelong learning. The local setting also reflects the realities of public school practice in a specific district context, making the inquiry relevant to actual supervisory conditions rather than to abstract policy alone.

The study is anchored on Adult Learning Theory, Reflective Practice Theory, and Clinical Supervision Theory. Knowles' theory of andragogy explains that teachers, as adult learners, respond best to self-directed, experience-based, and needs-based learning opportunities, which makes clinical supervision appropriate as a collaborative professional development strategy. Schön's Reflective Practice Theory supports the role of reflection-on-action and reflection-in-action in helping teachers examine and improve their instructional behavior. Clinical Supervision Theory, identified in the paper through the work of Goldhammer, Anderson, & Krajewski, explains the structured cycle of pre-observation, observation, and post-observation conferencing as a nonjudgmental process for instructional improvement. Together, these theories explain why clinical supervision can promote teacher agency, reflective inquiry, and sustained professional development. The theoretical paradigm further connects Glickman's Developmental Supervision Theory and Knowles' Adult Learning Theory to the clinical supervision cycle and to the study's expected outcomes, namely improved instructional competence, increased motivation and confidence, and reflective teaching and continuous growth. Conceptually, the framework uses an input-process-output logic in which the inputs include teachers' demographic profile, existing professional development practices, the nature and frequency of clinical supervision, and administrative support; the process includes pre-observation, observation, post-observation, feedback, dialogue, coaching, mentoring, and survey-based analysis; and the outputs include improved professional practices, increased teacher self-efficacy, and sustained professional growth.

Although the literature reviewed in the paper generally supports the value of supervision in improving teacher performance and learner outcomes, the study argues that Philippine research has often concentrated on broad supervisory practices, school leadership, or administrative performance measures such as IPCRF ratings. According to the paper, fewer studies directly examine the structured and cyclical nature of clinical supervision, particularly the distinct functions of pre-observation, observation, and post-observation conferences in fostering reflective practice and professional growth. The paper also points out that implementation fidelity, contextual barriers, and enabling conditions in resource-limited or rural public schools remain under-investigated. The rationale of the study, therefore, is to examine how clinical supervision specifically contributes to the professional development of teachers in terms of skill enhancement, self-reflection, instructional innovation, and student engagement, while also identifying the practical barriers and supports that affect its effectiveness in public school settings. This makes the study both context-specific and development-oriented.

Based on the paper's emphasis, the study aligns primarily with SDG 4 – Quality Education because it focuses on strengthening teacher quality, improving instructional practice, and supporting better student learning through continuous professional development. It also has a secondary connection to SDG 17 – Partnerships for the Goals because the national and local context described in the paper highlights the shared roles of school leaders, teachers, DepEd, and LGUs in sustaining supervision and teacher development systems.

The study is important to educational sustainability because it supports continuous teacher learning, reflective practice, and improved classroom instruction over time. It is also important to institutional sustainability because it reinforces supervisory systems, collaborative school culture, instructional leadership, and evidence-based professional support structures. In addition, it contributes to social sustainability by addressing teacher motivation, confidence, well-being, and the quality of student learning environments. By examining both the developmental benefits and the contextual barriers of clinical supervision, the study also contributes to more sustainable policy and governance approaches to teacher development in public school settings.

2. Material and methods

2.1 Research Design

The study employed a descriptive research design. Its descriptive orientation was intended to gather detailed information on the extent to which clinical supervision is practiced in schools and on how teachers perceive its influence on their professional growth. Quantitative data were gathered through a structured survey questionnaire, and the results were analyzed using descriptive statistics such as mean, frequency, and percentage, together with measures intended to determine the strength and direction of the relationship between variables. This design was considered appropriate for identifying patterns and associations that may help inform policies and programs for improving supervisory practices and teacher development.

2.2 Locale of the Study

The study was conducted in Emilio Lee Llacer Sr. High School in San Jacinto District, Masbate, during School Year 2024–2025. The school is a public secondary institution under the San Jacinto District of DepEd Masbate Province and serves learners in Washington barangay and nearby communities. San Jacinto is a municipality in Masbate located on Ticao Island, while Washington is one of its barangays. The locale situates the study within a public secondary school context where clinical supervision is examined in relation to teacher professional development.

2.3 Respondents of the Study

The respondents were public secondary school teachers of Emilio Lee Llacer Sr. High School, San Jacinto, Division of Masbate, who were currently employed and had undergone clinical supervision by their school heads or supervisors. The respondents came from different subject areas and grade levels in order to provide a broader representation of professional development experiences associated with clinical supervision.

2.4 Sample and Sampling Procedure

The study used purposive sampling, a non-probability sampling technique in which participants were chosen based on criteria relevant to the investigation. The main criterion was that the teacher must have experienced at least one formal clinical supervision session during the current or previous academic year. This ensured that all respondents had direct experience with the process being studied. A total of 15 teachers were selected based on the availability and willingness of qualified participants and on the manageable size needed for in-depth data analysis. Efforts were also made to include teachers with varying years of service, academic ranks, and subject specializations in order to capture diverse perspectives on professional growth.

2.5 Research Instrument

The primary instrument was a researcher-made questionnaire developed to assess teachers' perceptions of the impact of clinical supervision on their professional development. It was developed from a review of relevant literature, supervision frameworks, and instruments used in related studies. The questionnaire had three parts. The first part focused on challenges encountered in clinical supervision and was intended to identify barriers that hinder its effectiveness. The second part dealt with aspects of professional development affected by clinical supervision, including respondents' experiences in the pre-observation conference, observation, and post-observation conference, as well as the role of supervisors in giving feedback, mentoring, and support. The third part measured the perceived effectiveness of clinical supervision in areas such as instructional strategies, classroom management, reflective practice, collaboration, and continuous learning. To establish validity, the instrument underwent expert validation by school heads, master teachers, and research advisers, and revisions were made based on their comments. A pilot test was also conducted with a small group of teachers outside the main sample to check reliability.

2.6 Data Gathering Procedure

Data gathering was carried out in a systematic and ethical manner. The researcher first secured approval from the appropriate school authorities and obtained informed consent from the participating teachers. After approval, the structured questionnaire was distributed to respondents, either personally or through digital platforms, depending on accessibility. The questionnaire focused on the challenges encountered in clinical supervision and its impact on different aspects of teachers' professional development. Respondents were given enough time to answer honestly and completely, after which the completed questionnaires were collected and checked for completeness. The gathered data were then organized, coded, and encoded for statistical analysis.

2.7 Data Analysis Techniques

The study used frequency count and rank, percentage, weighted mean, and Pearson correlation for the analysis and interpretation of data. Frequency and percentage were used to describe the responses, while weighted mean was used to determine the extent of clinical supervision on the professional development of teachers. Pearson correlation was identified as part of the statistical treatment for examining relationships among variables. The study also used a five-point scale with corresponding qualitative descriptions ranging from Strongly Agree to Strongly Disagree and extent interpretations from Very High Extent to Very Low Extent.

3. Results and Discussion

3.1 Challenges Encountered in Clinical Supervision

The results show that teachers generally agreed that clinical supervision is accompanied by notable implementation challenges, as reflected in a composite mean of 3.80. The most serious concern was limited time for meaningful feedback after observations, with a weighted mean of 4.27, followed by lack of follow-up support after sessions at 4.13. Other concerns also received agreement, including inconsistent practice of clinical supervision in school at 4.07, lack of clear objectives or expectations before supervision at 3.87, insufficient opportunity to reflect or contribute to post-observation discussions at 3.80, scheduling conflicts at 3.80, supervisors' lack of training or experience at 3.60, the perception that supervision feels evaluative rather than supportive at 3.67, and feelings of uneasiness or stress during observation at 3.40. These findings indicate that the most problematic part of the supervision process lies in the post-observation phase, particularly in the quality, continuity, and supportiveness of feedback. The overall pattern shows that the difficulties are not only logistical but also qualitative and relational, suggesting that clinical supervision may lose part of its developmental value when it is inconsistently practiced, weakly structured, or experienced as evaluative instead of collaborative. The chapter discussion therefore points to the need for more consistent implementation, better supervisor preparation, stronger follow-up mechanisms, and a more supportive supervisory climate.

3.2 Aspects of Professional Development Affected

Despite the challenges, the findings show that teachers agreed that clinical supervision positively affects their professional development, with a composite mean of 4.02. The highest-rated benefit was receiving constructive feedback that helps professional growth, with a weighted mean of 4.33. This was followed by increased confidence in delivering lessons at 4.13, improved instructional planning at 4.07, and better classroom management at 4.07. Teachers also agreed that clinical supervision leads to more varied teaching strategies at 4.00, improved student engagement at 4.00, enhanced ability to address diverse learner needs at 3.93, improved assessment and evaluation techniques at 3.87, and deeper reflection on teaching practices at 3.87. The results suggest that even when implementation is imperfect, clinical supervision is still perceived as beneficial across several core domains of teaching. The strongest gains are associated with constructive feedback and teaching confidence, while other benefits extend to planning, classroom management, instructional variety, learner engagement, reflection, and responsiveness to diverse students. The discussion in the chapter emphasizes that these outcomes establish clinical supervision as a valued mechanism for improving instructional skills, reflective capacity, and overall professional efficacy.

3.3 Perceived Effectiveness of Clinical Supervision

The findings reveal an exceptionally positive overall perception of the effectiveness of clinical supervision, with a composite mean of 4.50 interpreted as Strongly Agree. The highest-rated indicators were enhancement of instructional skills and promotion of collaboration and sharing of best practices, both with weighted means of 4.60. Teachers also strongly agreed that the feedback from supervision is useful for improving classroom practices at 4.53, that they feel more confident in their teaching after supervision at 4.53, and that they receive constructive and actionable suggestions during supervision sessions at 4.53. Other highly rated indicators included encouragement to reflect on teaching methods at 4.47, help in identifying areas for improvement at 4.47, application of what is learned from supervision to lesson improvement at 4.40, and viewing clinical supervision as a tool for professional support rather than criticism at 4.33. These results show that, in the view of the respondents, clinical supervision functions as a highly effective developmental tool. Its strongest contributions are seen in direct instructional improvement, collegial collaboration, teacher confidence, and actionable feedback. The discussion further indicates that teachers do not merely see supervision as a formal requirement; rather, they

perceive it as a meaningful source of support that promotes reflection, improvement, and professional growth. This makes clinical supervision an important and credible mechanism for strengthening teacher development despite the operational weaknesses identified earlier.

3.4 Paradox of Clinical Supervision: Challenging in Practice but Highly Valued in Impact

The results reveal a notable overall pattern in the study. Although teachers agreed that clinical supervision is associated with several implementation challenges, with a composite mean of 3.80, they still agreed that it positively affects their professional development, with a composite mean of 4.02, and strongly agreed with its overall effectiveness, with a composite mean of 4.50. The most serious concerns were limited time for meaningful feedback after observation (WM=4.27), lack of follow-up support (WM=4.13), and inconsistent practice of clinical supervision (WM=4.07). In contrast, the strongest positive results were the receipt of constructive feedback that supports professional growth (WM=4.33), greater confidence in delivering lessons (WM=4.13), and the enhancement of instructional skills and collaboration, both of which received the highest weighted mean of 4.60. Teachers also strongly agreed that clinical supervision is a tool for professional support rather than criticism (WM=4.33). This pattern suggests that teachers distinguish between the weaknesses in the implementation of clinical supervision and its developmental value. While time, follow-up, and consistency remain problematic, the supervision process is still perceived as beneficial because it provides constructive guidance, improves teaching competence, and strengthens professional confidence. This supports the view that clinical supervision remains effective when it is experienced as collaborative and growth-oriented rather than punitive. The finding also implies that the core principles of clinical supervision are already valued by teachers, but its impact can be further strengthened if schools address the practical barriers that weaken feedback quality and continuity. In this sense, the findings are consistent with the discussion in the manuscript that lack of time, insufficient supervisor preparation, and evaluative perceptions can hinder supervision, even though the process itself remains a meaningful mechanism for teacher development (Pajak, 2001), (Glickman et al., 2018), (Zepeda, 2012).

4. Conclusion & Recommendations

The study concludes that clinical supervision, although affected by practical and systemic challenges such as limited time for meaningful feedback, lack of follow-up support, inconsistent implementation, and unclear objectives, remains a highly valued and effective tool for the professional development of teachers. Despite these implementation concerns, teachers perceive clinical supervision as positively influencing instructional planning, classroom management, constructive feedback, instructional skills, collaboration, confidence, and overall teaching improvement, showing that its developmental benefits are strongly recognized in the school context.

The study recommends that school administrators and supervisors strengthen the implementation of clinical supervision by prioritizing structured post-observation feedback and follow-up, enhancing supervisor training and professional development, and ensuring consistency and clarity in supervision procedures and expectations. These actions are necessary to improve the quality, reliability, and developmental value of clinical supervision and to maximize its contribution to teacher professional growth.

The study is limited to public secondary school teachers who experienced at least one cycle of clinical supervision in Emilio Lee Llacer Sr. National High School during the covered school year. It excludes private school teachers, elementary school teachers, and administrative staff, and it relies solely on a researcher-made questionnaire and self-reported perceptions without classroom observations or interviews. Because of these delimitations, the findings may not fully capture actual changes in classroom performance and may not be generalized beyond the specific group of respondents included in the study.

Compliance with ethical standards

The study on clinical supervision and the professional development of teachers was conducted in accordance with institutional ethical standards and with proper permission from the concerned school authorities. Participation of the teacher-respondents was entirely voluntary and based on informed consent, and they were assured that their identities and responses would be kept confidential and used solely for academic and research purposes. The researcher observed honesty, respect, and fairness throughout the data gathering, analysis, and reporting processes. No conflict of interest is declared by the author, all individuals who contributed to the completion of the study are properly acknowledged, and the copyright of the manuscript remains with the author/s.

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