Improvement Teacher Competence in Making Lesson Plan through Clinical Supervision in State Senior High School 1 Suro, Aceh Singkil Regency

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Abstract: *This study is aimed to determine the increasing of teacher competence in Making Lesson Plan through Clinical Supervision in State Senior High School 1 Suro, Aceh Singkil Regency. The subjects were teachers at State Senior High School 1 Suro, Aceh Singkil Regency amounted five teachers with criteria for Social Teachers, i.e. economic, geography, sociology, and history. Subject is determined by purposive. The research instrument that used to determine the competence of teachers in making lesson plan is interview guides and a list of matches with the number of grains as much as 33. Meanwhile, to observe the clinical supervision activity in making lesson plan is used observation sheet. This study used school action research with two cycles. The results of the study is the assessing of teacher competence in making lesson plan after clinical supervision was classified in the less category at the first cycle with a score of 72,2 and the second cycle belong in good category with a score of 86.2. The activity assessment of clinical supervision at the fisrt cycle is very good with a score of 95, and the second cycle is the excellent category with a score of 100. Based on the analysis of data, can be concluded that the application of clinical supervision can improve the competency of teachers in making lesson plan in the State Senior High School 1 Suro, Aceh Singkil Regency. The implication of this research is specifically addressed to supervisors, that is the implementation of clinical supervision in the effort of helping teachers in making lesson plan.*

Keywords: *Teachers' competence, Clinical Supervision, Lesson Plan*

I. Introduction

Teachers are one component that has a very important role in determining the quality of education in an educational unit. Teachers are the main capital in learning. Teachers even play a significant role in an educational dynamic. This shows that teacher performance is needed. The optimal teacher performance is yearning of every school. Teachers who have good performance can be seen from the various performances that appear. The duty and responsibility of the noble teacher is to carry out the teaching.

Teaching and educating professionally requires special skills. Specific skills can be termed as competence. Teacher competence is a set of knowledge, skills, and behavior that must be owned, experienced, and mastered by teachers in performing professional duties.

Usman (2010: 22) states that a professional teacher is a person who has the ability and special skills in the field of teacher, so he is able to perform the duties and functions as a teacher with maximum ability. Kunandar (2007: 46) states that professional teachers, essentially, are the teachers who have the required competencies to perform educational and teaching tasks. In addition, teachers are closely related to the quality of school graduates.

Hamalik (2006: 76) states that professional teachers are teachers who have certain conditions, i.e. (1) Physical requirements, physical health which means an educational staff should be able-bodied and have no infectious diseases that endanger; (2) Psychic requirement, that is spiritual healthy which means no mental disorder or abnormality; (3) Mental requirements, which have a good mental attitude towards the profession of education, love and serve and have a high dedication to the task and position; (4) moral requirement, that is having noble character and having high moral attitude; And (5) The intellectual requirement, that is, having high knowledge and skill from educational institute of educational staff, providing the provision to fulfill its duty and obligation as educator.

Based on the above description, it can be concluded that professional teachers are educators who have a special skill / competence in implementing learning in accordance with the ruleswhich is have been determined. Although the position of teachers is a professional position, a few teachers performed their duties as

unprofessional, and has become a public secret such as late to enter the classroom, using learning resources that are only focused on textbooks, and even found many teachers who do not have learning tools.

Zuhdan (2011: 16), learning tool is a tool or equipment to implement a process that allows educators and learners to do learning activities. Learning tools become a guidance for teachers in implementing learning either in class, laboratory or outside the classroom. Permendikbud No. 65 Year 2013 on Standard Process of Primary and Secondary Education mentioned that the preparation of learning tools is part of learning planning. One of the most decisive learning tools in the learning activities in the classroom is the Lesson Plans (RPP). RPP is structured in a comprehensive and systematic manner in which learning takes place interactively, inspirationally, fun, challenging, efficient, motivates learners to participate actively, and provides sufficient space for initiative, creativity and independence according to talents, interests, and physical and psychological development learners. The RPP is compiled based on KD or sub-theme held in one or more meetings.

RPP can serve as a learning compass, designed by each teacher based on predetermined standards. Therefore, in the process of making, it's necessary a deep understanding of each component or indicator of the RRP so that teachers are able to design and develop themselves. Thus, it can be concluded that the RPP is a mandatory learning plan prepared by teachers to be guidance in the process of learning in the classroom.

But, in facts, thre are still many teachers who have not understood and was not able to arrange the RPP. Generally, teachers make/compile RPP just to fulfill administrative obligations when supervising was happened. From the discussion with high school supervisors in Aceh Singkil district, it was found that there are still many teachers (both in public and private schools) who are unable to explain their own RPP. Teachers can not decompose the components which is contained in the RPP in accordance with Permendikbud no. 22 Year 20016. Supervisors describe that the RPP is RPP obtained by copy and paste. The RPP comes from the internet or teacher files from other schools.

In addition to discussions with supervisors, interviews were also conducted for teachers of SMA Negeri 1 Suro Kabupaten Aceh Singkil. Interviews were conducted to determine teacher's initial competence in preparing RPP. From the results of interviews conducted, its found the data as follows:

Table 1.1. Pre-Cycle Interview Results

Teacher	Observed (RPP Components)									Amount	Score
	1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**		
T1	1	1	0	1	1	1	0	0	0	5	56
T2	1	0	0	1	1	0	0	0	0	4	44
T3	1	0	0	1	1	0	0	0	0	3	33
T4	1	1	0	1	1	1	0	0	0	5	56
T5	1	0	0	1	1	0	0	0	0	3	33
Total											222
Average											44,4

From the data above, it is known that from five teachers of Social Sciences, none of them can arrange the RPP properly. This is based on the opinion of Endrayanto and Harumurti (2014: 292) which states that the acquisition of grades < 55 is category E with very less criteria.

Based on the facts which is found above it is necessary to be given continuous guidance on the teacher of SMA Negeri 1 Suro of Aceh Singkil Regency in preparing the Lesson Plan (RPP) through academic supervision activities. Academic supervision is done by school supervisor to the teacher of SMA Negeri 1 Suro of Aceh Singkil Regency. This is in accordance with the school supervisory Basic Task and Functions based on Permendiknas No.12 of 2007 on the six standards of school supervisory competence, one of which is the academic supervision is to foster teachers.

The type of academic supervision that will be done to the teacher of SMA Negeri 1 Suro of Aceh Singkil Regency is the clinical supervision. Clinical Supervision is professional assistance undertaken by supervisors to teachers who has problems in learning so that the teacher are able to solve the problem through intensive guidance systematically arranged in order to improve teaching skills and improve the professionalism of teachers.

The implementation of clinical supervision procedures takes place in a cyclical process, consisting of three stages: the initial meeting stage, the observation stage of the teaching and the meeting, and feedback stage. These stages require a meeting between the teacher and the supervisor. At the initial meeting stage an action plan is undertaken which is a scenario or work program to be undertaken at the time of conducting the research. Action planning includes all steps of action in detail, and any need for action execution. In the second phase, observations are made in the implementation of previously planned actions. What strategies to use, what materials are taught or discussed. Observation serves to recognize developments that occur with the action. The third stage, that is reflection is an evaluation effort undertaken to determine the next action.

Based on the above explanation, it is believed that by applying clinical supervision, teacher competence in preparing RPP can be improved. For that reason, referring to the problems faced by SMA Negeri

1 Suro teachers as mentioned above, it is necessary to conduct an action research under the title "Improvement Teacher Competence in Preparing RPP Through Clinical Supervision In SMA Negeri 1 Suro Kabupaten Aceh Singkil."

II. Research Methodology

This research was conducted at SMA Negeri 1 Suro of Aceh Singkil Regency. The time of study is scheduled for three months from April 2016 to June 2017.

The subjects of this study are teachers of Social Sciences (Economics, Geography, History and Sociology) at SMA Negeri 1 Suro Aceh Singkil Regency. The number of teachers who became the subject of this study amounted to five teachers.

The object of this study is the competence of teachers in preparing the Lesson Plans (RPP) through clinical supervision. This study uses School Action Research (PTS). The implementation of this study used clinical supplementation. Supervisor and teacher should be able to work together and establish a good relationship for the purpose can be achieved. This research is designed with a cycle process consisting of four stages: planning phase, doing the action, observation and reflection. The four stages are one cycle where each of these stages keeps repeating until the problem is resolved or the success indicator is achieved. If in the first cycle there are still shortages and have not reached the level of success, then the next cycle will be implemented.

Data collection techniques in the implementation of this School Action Research is interview, observation and documentation. The instruments of data collection in this study are as follows: (a) Interview Guidelines, (b) Checklist, and (c) Observation Sheet on the implementation of clinical supervision.

1. Quantitative data is the value of the competence of teachers to make Classroom Action Research is analyzed by looking for the average value and percentage of success in preparing the RPP. The data has been collected in the analysis by comparing the data before the action with the data after the action, that is the data of teacher observation results in the implementation of RPP preparation. According to Endrayanto and Harumurti (2014: 292) to determine the acquisition value in each cycle is determined by the formula:

$$\text{Score} \quad = \quad \frac{Total\ Rating\ Score}{Maximum\ Score} \times 100$$

With the following criteria:

90 - 100   A   very good (VG)
80 - 89   B   good (G)
65 – 79   C   enough (E)
55 – 64   D   less (L)
< 55 E   very less (VL)

2. Qualitative data is the data in the form of sentence-shaped information that gives an overview of teacher activity in preparing RPP. Sugiyono (2011: 337) suggests that data analysis can be done with the steps as follows:
a.   Data collection
b.   Grouping data by similar subject matter
c.   C. Data reduction is summarizing, choosing the essentials, focusing on the important things, looking for themes and patterns and removing unnecessary.
d.   D. Presentation of data in the form of tables and graphs.
e.   Inductive retrieval is interpreting the already grouped data.

The determination of teacher success indicator criteria is determined by the researcher himself. This action research is said to succeed if as many as 80% of the total participants are able to develop RPP with a minimum score of 80. In accordance with the opinion of Endrayanto and Harumurti (2014: 292) stating that the value of 80- 89 has good criteria.

III. Results And Discussion

Cycle I

Implementation of the action on the first cycle is implemented for 30 days from 10 April 2017 to 10 May 2017 in SMA Negeri 1 Suro Aceh Singkil Regency. Before the clinical supervision process is carried out, the researcher prepares an observation sheet that will be used to measure teacher competence in preparing RPP. During the course of the action, the collaborator becomes an observer and fills in the prepared activity observation sheet.

Supervision is carried out in three stages: the initial meeting stage (pre observation), the observation stage, and the reverse meeting stage.

At the initial meeting stage (pre-observation) the researcher has prepared the instruments used in pre-observation implementation. The instrument used is a pre-observation interview (pre-observation) clinical supervision instrument sheet. At the pre-observation stage, the researcher initiates the meeting by creating an intimate, relaxed and comfortable atmosphere with the teacher to be supervised. Then the researchers asked the teacher to show the RPP prepared by the teacher. Next researchers and teachers review the RPP that has been prepared by the teacher. After reviewing the lesson plan prepared by the teacher, the researcher also reviewed the target skill of preparing the lesson plan and the RPP component that will be trained and given attention with the teacher. The next step after review, the researchers discussed mutual consent with the teacher to develop the lesson plan. Once approval is reached, researchers and teachers determine which instrument to use. Then closed by making the contract of supervision implementation.

In the implementation stage of the preparation of the Learning Implementation Plan, researchers have prepared the instruments used in the observation implementation. The instrument used is the observation sheet of the process of conducting the clinical supervision. This observation sheet is used to measure the success of clinical supervision. At this stage of implementation, the researcher asks the teacher to provide the RPP that has been made and then identify the RPP that has been prepared by the teacher. After receiving the RPP that teachers have created, the researcher identifies the RPP prepared by the teacher. Then, the accepted RPP was reviewed and assessed by the researcher based on a list of suitable RPP components.

After the pre-observation stage and the observation stage is carried out. The last stage of first cycle is to carry out a reversal meeting. At this stage, researchers have prepared the instruments used in the observation. The first step done by the researcher is to ask the general teacher's feelings or how the teacher's impression of observation. After getting answers from teachers about the feelings and impressions of them, then researchers provide reinforcement for the work which is done by the teachers in preparing the RPP. After that the researchers asked the teachers to analyze the results of the assessment of the RPP that has been compiled. After the RPP was analyzed, researchers and teachers discussed the results of the teacher-prepared RPP analysis. When the analysis was done, the researcher still found the teacher shortage in preparing the lesson plan, but the researcher did not blame the teacher for the lack/incompatibility of the teacher's RPP component/indicator. Instead, the researcher and the teacher reviewed the RPP/RPP component that the teacher has prepared. Researchers and teachers then identify the difference between the planned target and the achieved targets. After finding the difference between the planned target and the achieved target, the researcher then recalls the contract that has been made. Next, the researcher and the teacher discuss the back-and-forth analysis of the target. The researcher asked the teacher's feelings after analyzing the target skills and the main concern. Then the researchers concluded the results of what teachers had gained during the clinical supervision process. For the results of observations which is not suitable to the contract, the researcher submits to the teacher training directly. Then the researchers and teacher re-formulate the things that have not been achieved to be considered for further supervision implementation. At the end of this stage, researchers are trying to improve morale and motivate teachers in planning exercises and at the same time establishing the next supervision plan.

During the supervision exercise, collaborators (peer teachers) become observers and fill in the observation sheet of prepared activities. The observation sheet used was an observation sheet of the process of conducting clinical supervision. The results of the implementation of clinical supervision activities of cycle I can be seen in the figure in table 1.1. below:

Table 1.2. Values of Teacher Competence in preparing RPP In Cycle I

	Teacher's number					Amount	Average
	1	**2**	**3**	**4**	**5**		
Amount	20	27	28	27	17		
Score	61	82	85	82	51	361	72
Note	L	G	G	G	VL		C

From the table above is known that the number of score obtained is 361 and the average score is 72 with the highestscore of 85 and the lowest score 51.

Reflection on the first cycle data that has been obtained is the competence of teachers in preparing the RPP did not achieve success because only three teachers who are able to arrange the RPP with the score reached ≥ 80, while the success criteria in this study is at least 80% (4 teachers) with a value reaching ≥ 80. Therefore, researchers feel the need to make an improvement effort on the actions undertaken in supervision of clinical supervision cycle II.

Cycle II

Implementation of action in cycle II is implemented for 21 days starting on May 15, 2017 to June 3, 2017 in SMA Negeri 1 Suro Aceh Singkil. Supervision is carried out in three stages: the initial meeting stage (pre observation), the observation stage, and the reverse meeting stage.

At the initial meeting stage (pre-observation) the researcher has prepared the instruments used in pre-observation implementation. The instrument used is a pre-observation interview clinical supervision instrument sheet. At the pre-observation stage, the researcher initiates the meeting by creating an intimate, relaxed and comfortable atmosphere with the teacher to be supervised. Then the researcher asks the teacher to show the RPP prepared by the teacher in cycle I. Next researcher and teacher review the RPP which have been prepared by teacher in cycle I. After reviewing RPP which have been made by teacher, researcher also review target skill to make RPP/RPP components to be trained and given attention with teachers. The next step after review, the researchers discussed mutual consent with the teacher to develop the lesson plan. Once approval is reached, researchers and teachers determine which instrument to use. Then closed by making the contract of supervision implementation.

In the implementation stage, researchers have prepared the instruments used in the observation implementation. The instrument used is the observation sheet of the process of conducting the clinical supervision. This observation sheet is used to measure the success of clinical supervision training. In the second cycle of implementation phase, the researcher also asks the teacher to provide the RPP that has been made and then identify and assess the RPP that has been prepared by the teacher. Assessment is done by the researcher based on the attachment of the list of suitable RPP components.

After the pre-observation stage and the observation stage is carried out. The last stage in cycle II is to carry out a reversal meeting. At this stage, researchers have prepared the instruments used in the observation. The first step done by the researcher is to ask the general teacher's feelings or how the teacher's impression of observation. After getting answers from teachers about the feelings and impressions of teachers, then researchers provide reinforcement for the teacher's work in preparing the RPP. After that the researchers asked the trainer to analyze the results of the assessment of the RPP that has been compiled teachers. After the RPP was analyzed, researchers and teachers discussed the results of the teacher-prepared RPP analysis. When the analysis was done, the researcher still found the teacher shortage in preparing the lesson plan, but the researcher did not blame the teacher for the lack/incompatibility of the teacher's RPP component/indicator. Instead, the researcher and the teacher reviewed the RPP / RPP component that the teacher has prepared. Researchers and teachers then identify the difference between the planned target and the achieved targets. After finding the difference between the planned target and the target, the researcher then recalls the contract that has been made. Next, the researcher and the teacher discuss the back-and-forth analysis of the target. The researcher asked the teacher's feelings after analyzing the target skills and the main concern. Then the researchers concluded the results of what teachers had gained during the clinical supervision process. For the results of observations Which is not suitable to the contract, the researcher submits to the teacher training direclty.

During the supervision exercise, collaborators (peer teachers) become observers and fill in the observation sheet of prepared activities. The observation sheet used was an observation sheet of the process of conducting clinical supervision.

Based on the result of observation in cycle II using matching list instrument, teacher competency value data in preparing RPP in cycle II can be seen in table 1.3.:

Table 1.3. Values of Teacher Competence in preparing RPP In Cycle II

	Teacher's Number					Amount	Average
	1	**2**	**3**	**4**	**5**		
Value	27	28	31	29	27		
Score	82	85	94	88	82	431	86,2
Notes	G	G	VG	G	G		G

From the table above is known that the number of scores obtained is 431 and the average score is 86.2 with the highest score 94 and the lowest score 82.

Reflection on the data cycle II that has been obtained is the competence of teachers in preparing the RPP has achieved success because the five teachers are able to arrange the RPP with a score reaching ≥ 80, while the success criteria in this study is at least 80% (4 teachers) participants are able to make RPP with the score reaches ≥ 80. Therefore the investigator feels that it's not need to make an improvement effort on the actions undertaken in supervision of clinical supervision of the next cycle.

Berdasarkan hasil penilaian yang dilakukan peneliti mulai dari prasiklus, siklus I dan dilanjutkan dengan siklus II mengenai kompetensi lima orang guru dalam menyusun RPP, maka nilai kompetensi guru dalam menyusun RPP dapat diuraikan seperti tabel 1.3. berikut ini:

Based on the results of the assessment conducted by researchers starting from pre-cycle, cycle I and followed by cycle II about the competence of five teachers in preparing the RPP, the competence of teachers in preparing the RPP can be described as table 1.4.

Table 1.4 the competence of teachers in preparing the RPP Cycle II

Teacher's Code	Cycle	Score	Category
T1	Pre	11	Very Less
	I	61	Less
	II	82	Good
T2	Pre	22	Very Less
	I	82	Good
	II	85	Good
T3	Pre	33	Enough
	I	85	Good
	II	94	Very Good
T4	Pre	33	Very Less
	I	82	Good
	II	88	Good
T5	Pre	11	Very Less
	I	51	Very Less
	II	82	Good

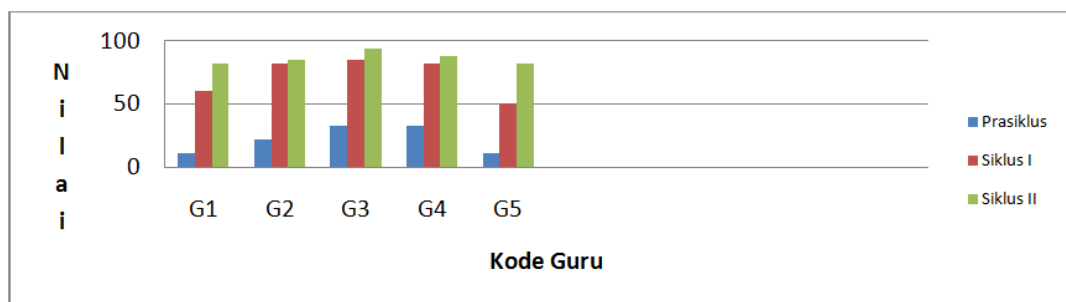Table overview 1.4. Can be displayed as shown in Figure 1.1.

Figure 4.1 Diagram of Competency Values Score in preparing RPP

Based on the results of action between cycles can be seen that thera are increasing in teacher competence in preparing the RPP in accordance with the predicted success of the action.

IV. Coclusion

The conclusions that can be drawn from this research are as follows:
Implementation of clinical supervision can improve teacher competence in preparing RPP in SMA Negeri 1 Suro Kabupaten Aceh Singkil. After performing the action through supervision of clinical supervision in cycle I, it can be seen that from five teachers there are no teachers (0%) who have excellent grades, three teachers (60%) who have good grades, no teachers (0%) Which has enough value, one teacher (20%) who has less value, and one teacher (20%) who has very less value. In clinical supervision cycle II, is known that from five teachers, all teachers (100%) have been able to prepare RPP with minimum criteria either.

V. Suggestion

Based on the results of the research, the implications and conclusions can be submitted that to improve the competence of teachers in preparing the RPP can be applied through clinical supervision. Therefore, school supervisors can make an effort to understand the stages of clinical supervision and apply clinical supervision in the supervision because the clinical supervision focuses on improving the skills of teachers.

For the Head of Aceh Education Office, it is better to provide training to the supervisor to broaden the horizons of continuous application of clinical supervision. For teachers, they must improve their competences, especially in improving the skills of preparing RPP so that there is an increase in the quality of learning. For further research is expected to conduct more in-depth research on clinical supervision and examine deeper issues, especially studying the problem of learning in the classroom.

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