

PREPARATION OF FUTURE TEACHERS FOR DIAGNOSTIC ACTIVITY - THE BASIS FOR IMPROVING EDUCATION QUALITY

Nasyrova Zarina Munirovna
Basic (PhD) doctoral student
Department of General Pedagogy
Andijan State University
zarinochka31@mail.ru

ABSTRACT

The article considers the totality of concepts that make up the diagnostic activity of a teacher, the integration of the concepts of “control”, “regulation” and “correction”. The types of regulation of the educational process are described.

Keywords: Diagnostics, regulation, control, education quality.

INTRODUCTION, LITERATURE REVIEW AND DISCUSSION

In accordance with the tasks set in the Decree of the President of the Republic of Uzbekistan dated February 7, 2017 No. UP-4947 “On the Strategy for the Further Development of the Republic of Uzbekistan” and in the Concept for the Development of the Higher Education System of the Republic of Uzbekistan until 2030, in the near future it is necessary to ensure the set quality the educational process, improving the professional level and responsibility of teaching staff, streamlining infrastructure, strengthening resource and staffing, introducing effective mechanisms for the functioning of the retraining and advanced training of teaching staff. Ultimately, it is necessary to equip educational institutions with highly professional pedagogical and managerial personnel capable of ensuring high quality education.

The urgency of the problem of training, retraining and advanced training of teaching staff is caused by an aggravating decline in the quality of education at all levels, which the head of state constantly draws attention to in his speeches, resolutions of the President of the Republic of Uzbekistan and special assignments are aimed at this.

To identify the content of preparing future teachers for diagnostic activities, it is necessary to consider the totality of concepts that form the basis of this activity. The essence of the activity under consideration is reflected in its goals, and therefore we attributed to its root concepts the intensification and optimization of the learning process, diagnostics and control, regulation and correction, the activation and stimulation of educational activities. Let's consider these concepts in more detail.

In recent years, there has been a progressive pedagogical tendency to strengthen “diagnostics, a flexible combination of prospective and operational control over educational activities in almost all forms of educational organization” [2, p. 131]. Organization of operational control over the quality of training should be included in any training technology.

To assess the effectiveness of learning and training, it is necessary to update the knowledge of students. The appropriate tool should allow to measure the growth of knowledge, skills, correlated with the standard.

In our work, by pedagogical diagnostic activity we mean a systematic, comprehensive study of system objects and subjects of training and education, their dynamics and functioning in natural conditions, based on a comparison of the results of pedagogical influences with existing standards and criteria.

From the above it follows that pedagogical control can be considered as an activity to identify and evaluate the responses of pedagogical influences on the subject. In this case, pedagogical diagnostics, as an activity on a comprehensive and systematic study of the functioning of the "teacher-student" system, includes monitoring the effectiveness of training and education, that is, a broader and deeper meaning is invested in diagnostics than in the traditional test of knowledge and skills. From what has been said, a conclusion follows: control of knowledge and skills is included in the scope of the concept of "training diagnostics."

A broader concept, in comparison with the control of knowledge and skills, is diagnosis, which is understood as a process of pedagogical activity.

Diagnostics is considered as an approach to clarify all the circumstances of the didactic process, to accurately determine the results of the latter. Without diagnostics, it is impossible to effectively manage the didactic process, to achieve optimal results for the existing conditions. "The purpose of didactic diagnosis is the timely identification, assessment and analysis of the educational process in connection with the productivity of the latter" [2, p. 388].

Monitoring, testing and evaluating the knowledge and skills of trained individuals are included in the diagnosis as necessary components. In the context of using diagnostics, didactic control also acts as a kind of training method, since the diagnostic results containing evaluative judgments are useful primarily to the learner himself.

By learning correction, we understand the activity of the subject aimed at eliminating learning defects expressed in the discrepancy between real learning outcomes and standards.

Correction is preceded by control as an action aimed at identifying, evaluating and measuring knowledge.

With regard to pedagogy, we give the following interpretation: regulation in training is a change in educational activity and its results in order to achieve the level of one or another standard. At the same time, the guiding and normative documents should serve as standards: the State educational standard, training programs, instructions, etc. Like correction, regulation can be external, carried out by the teacher, head teacher, director, expert group, etc., and internal - self-regulation.

We have identified the following types of training regulation: prolongation of the process of formation and consolidation of knowledge and skills; change in the complexity and difficulty of training and control tasks; elimination of interference, learning defects; reduction or increase in the volume and content of training.

A comparison of the interpretations of the concepts of "regulation" and "correction" leads to the conclusion: the concept of "correction" is included in the scope of the concept of "regulation", since it clearly forms part of the latter. In turn, the concept of "regulation" is associated with the concept of "diagnosis", because the diagnosis of training gives a signal about the need for regulation.

Diagnostics reveals the shortcomings of training based on the study of the sides of educational activity. Analysis of data on the progress of knowledge formation, on the skills of their application in various situations allows us to draw conclusions about the content of the regulation of the learning process for both the teacher and the student.

Regulation as a process should be attributed to the concept of “management”. M.B. Volovich [3] writes that errors in learning appear when a number of conditions, guidelines necessary for the correct execution of actions are absent, when the process of forming actions is not controlled and not controlled by the teacher. Therefore, the fight against errors must begin with control over the process of assimilation of knowledge. In fact, we are talking about the correction of knowledge.

The regulatory activity of the teacher is carried out in two directions: regulation of the student’s activity (regulation of the formation of knowledge and skills; regulation of the volume and content of training; correction during training, compensation); self-regulation (selection and implementation of actions to prevent and eliminate learning deficiencies).

Diagnostics and regulation are interconnected. Regulation can both reduce and increase the value of the considered characteristics, which may be undesirable to achieve the goal. To establish the direction and magnitude of the regulatory impact on the object, diagnostics are required, because regulation without diagnostics is blind. In turn, the diagnostic function is learning management. In this regard, they should be considered as a couple, and diagnostics acts as a primary process, and regulation follows it. The diagnostic result is determined by regulation, and since, basically, estimation, measurement is probabilistic, the relationship between the diagnostic result and regulation can be considered deterministic-probabilistic.

Diagnostics is intended to regulate the volume and quality of knowledge and skills in order to achieve the planned level of training. The main indicator is the total score of the traditional assessment. As a regulatory mechanism, a special scale of uneven ratings is used, which stimulates cognitive activity. A systematic approach to the procedure for diagnosing knowledge and skills related to a specific topic, section, academic discipline is expressed in a discrete form of its implementation, because individual “portions” of educational material are put together, arranged in blocks interconnected by the learning logic, and the student’s knowledge and skills in each block must be evaluated. As a result, each student at the end of the study of the topic, section, discipline has a set of points.

It should be noted that the diagnosis in question is suitable for monitoring learning in large sections of educational material, including several topics or in individual disciplines. The total assessment at the same time summarizes the training. As diagnostic tools, you can use tests, traditional written tests, independent, laboratory work, etc., that is, any instrumental control methods.

Controlled portions of knowledge and skills should be consistent with the ratings of the scale. A block with a lower maximum score should correspond to a smaller and simpler “portion” of educational material. That is, the division of educational material into blocks is uneven.

The final (last) block should contain the largest amount of controlled material and include the most complex training tasks.

In this case, the developer of the meters should be able to: 1) analyze the structure of large blocks of educational material; 2) to divide them into complete, but unequal parts; 3) select "nuclear" material for the construction of individual meters.

The design of tests, control, independent and laboratory work is carried out according to well-known recommendations.

Instrumentalization of diagnosis. Due to significant variation evaluations associated with repeated diagnosis and use progressive rating scale, it is advisable to use the operation ranking i.e. assignment of grades to students. It is convenient to present the results with a table of ranks, and it is advisable to determine the ranks:

- 1) according to the total results of the first diagnosis;
- 2) in the first and second;
- 3) in the first, second, third, etc.

This allows you to track the changes that have occurred in the knowledge and skills of students in dynamics.

Standardization of diagnostics. The main characteristics are determined for each diagnosis, because communications between blocks are less "rigid" than in previously considered systems, i.e. it is necessary to select and use sufficiently reliable and valid techniques.

It should be noted that the diagnosis allows you to select a group of students who have well mastered the educational material, capable of further successful promotion in this field of knowledge. Moreover, a prolonged examination is objective, democratic in nature, giving a chance to every student.

1. Level diagnostics "From simple to complex".

Diagnostics is intended to achieve the planned level of complexity through a series of adjusting influences. The main regulatory mechanism is the supply of educational material in "portions" in the direction "from simple to complex" with a change in "dosage" according to the results of diagnoses, both the volume and content of the educational material and the time of training are subject to variation.

The work on the design of diagnostics is based on the ability to set the difficulty levels of training tasks.

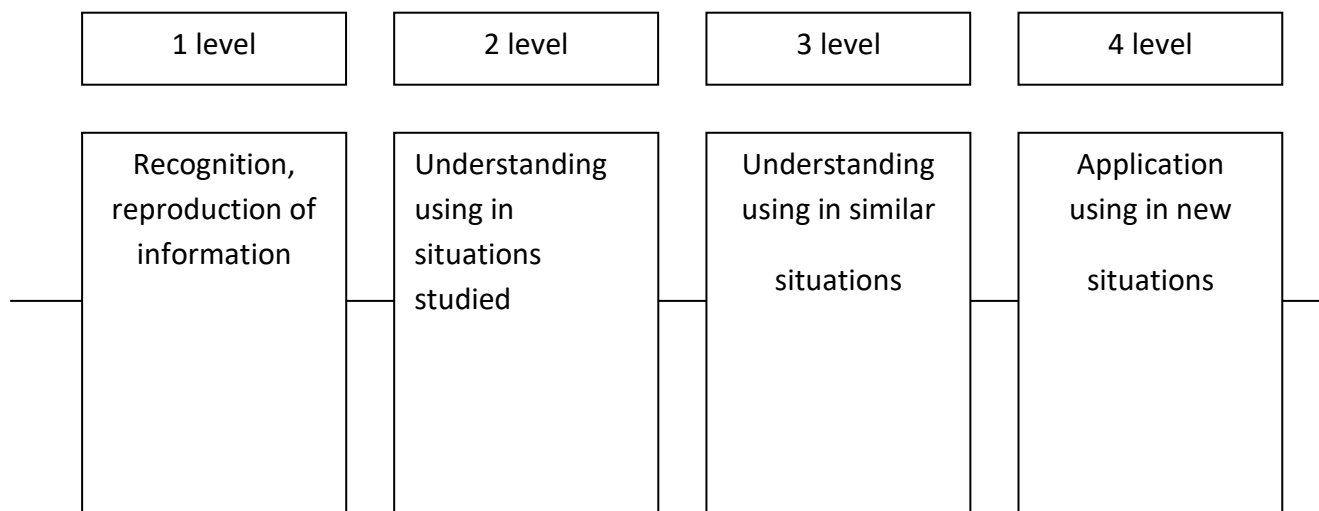
2. Level diagnostics "Perspective goals".

The main purpose is to achieve promising goals.

Diagnostic Levels:

- a level that meets the requirements of the State Standard;
- A level that meets the requirements for college entrants;
- a level that meets the requirements for university entrants;
- creative level..

Work on the design of diagnostics requires the developer of methodological excellence in teaching a separate discipline.

The block diagram of the level diagnosis "From simple to complex."**3. Multifactorial diagnostic and regulatory systems**

Diagnostics of the effectiveness of education and training in these systems are combined with diagnostics of factors that determine the characteristics of students. Diagnostic items should represent the organic interweaving of signs corresponding to both the main characteristics and the factors that determine them. In this case, part of the diagnosis should determine the training (training effectiveness), and the other part should give a characteristic (assessment) to any factor. Such systems may be suitable for identifying the degree of connection between factors and levels of training (learning efficiency) of specific students. They are convenient for factor analysis with the subsequent development of a learning strategy.

As factors, the characteristics of cognitive processes (perception, attention, thinking) can be taken, the study of which is very useful for teaching teenage children.

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