



**A Survey of Continuing Educations Programs Conducted by Professional Development: The International Journal of Continuing Social Work Education**

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# A Survey of Continuing Education Programs Conducted by Professional Development: The International Journal of Continuing Social Work Education

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Noel Landuyt and Megan R. Morgan

## Introduction

Social work is a field that continually evolves as researchers and practitioners refine practices and explore the use of new interventions in order to best meet their clients' needs. Due to regular developments in the profession, social workers need a way to remain informed about best practices. In fact, the National Association of Social Workers' Code of Ethics requires social workers to remain professionally competent by "routinely review[ing] the professional literature and participat[ing] in continuing education relevant to social work practice and social work ethics" (National Association of Social Workers [NASW], 2008). Continuing education (CE) programs provide a means by which social work practitioners can comply with this ethical principle. CE is an ongoing part of social workers' education that allows them to provide quality services to their clients (Congress, 2012).

To help social workers develop and maintain professional competency skills, many states, through governmental authority, have made completing CE hours a requirement for license renewal. The specifics and administration of these CE hour requirements are operated on a location-by-location basis, causing great variation in CE programs across the nation. Consequently, there is often very little connection or coordination in CE program information. This is a detriment to CE program staff, as more communication would allow them to learn from one another, and replicate the successes and avoid the pitfalls of other programs. In order to address this need, *Professional Development: The International Journal of Continuing Social Work Education* developed a survey to gather information from various CE programs. The data from this study can serve as a benchmark

and resource for CE program staff and the broader social services community.

## Methods

*Professional Development: The International Journal of Continuing Social Work Education* developed and administered a cross-sectional survey of CE programs in the fall of 2013. The mission of this journal is to provide:

...Scholarly and relevant articles on continuing education, professional development, and training in the field of social welfare. The aims of the Journal are to advance the science of professional development and continuing social work education, to foster understanding among educators, practitioners, and researchers, and to promote discussion that represents a broad spectrum of interests in the field (*Professional Development: The International Journal of Continuing Social Work Education*, n.d.).

The survey's sample was drawn from members of the Continuing Education Network (CENet), a Council on Social Work Education committee. This committee is composed of members from ninety CE programs within the United States and Canada. CENet members were chosen for this survey due to their professional experience with their own CE programs and their expertise and knowledge of social work CE. Lead administrators of the CE programs and/or those individuals listed as the program contacts were sent email invitations to take the survey in the fall of 2013. Those who had participated in the 2009 iteration of the CE survey received a copy of their previous survey answers for updating. All other participants were given a blank survey to fill out and return via email, fax, or mail.

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Discussions between key members of the CENet and the principal investigators led to the development and design of survey questions. The survey consisted of 31 questions, some of which were multifaceted and asked for multiple answers. Items were both closed and open-ended, with answer choices ranging from “yes/no” to “choose all that apply.” Topics addressed by the survey include state CE hour requirements, CE program and staff information, resources available, and course topics. Data from completed surveys were entered in an Excel worksheet, and descriptive statistics were calculated in order to better understand the survey responses given.

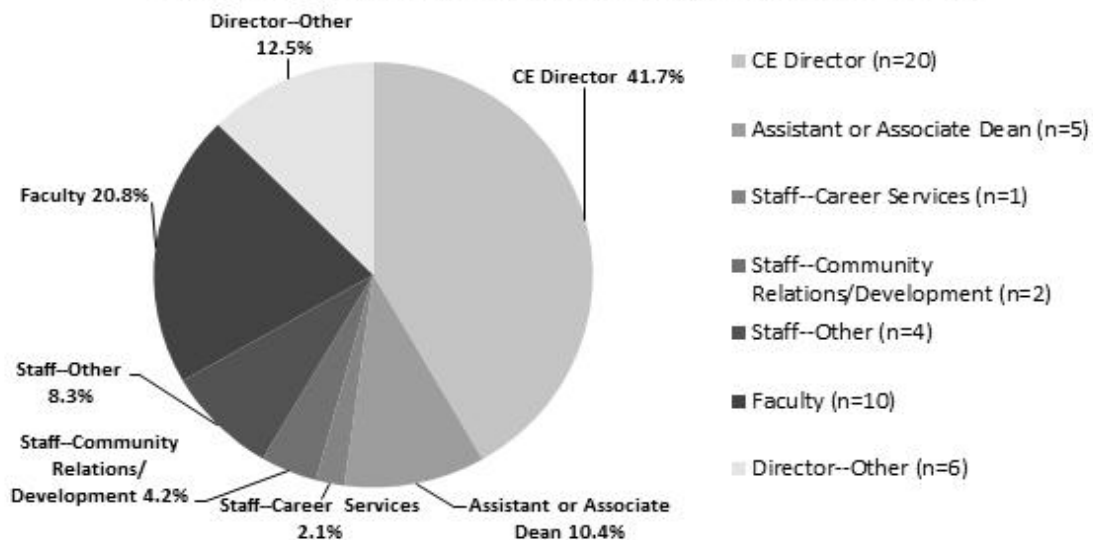
**Results**

In the fall of 2013, 77 email invitations were sent to CENet members. Of those invited to participate, 30 individuals returned completed surveys, resulting in a response rate of 39 percent. Survey respondents indicated that they fulfilled a large variety of roles within their CE programs, with some respondents performing multiple roles. Consequently, the frequencies reported in Figure 1 and below for the professional role(s) of respondents

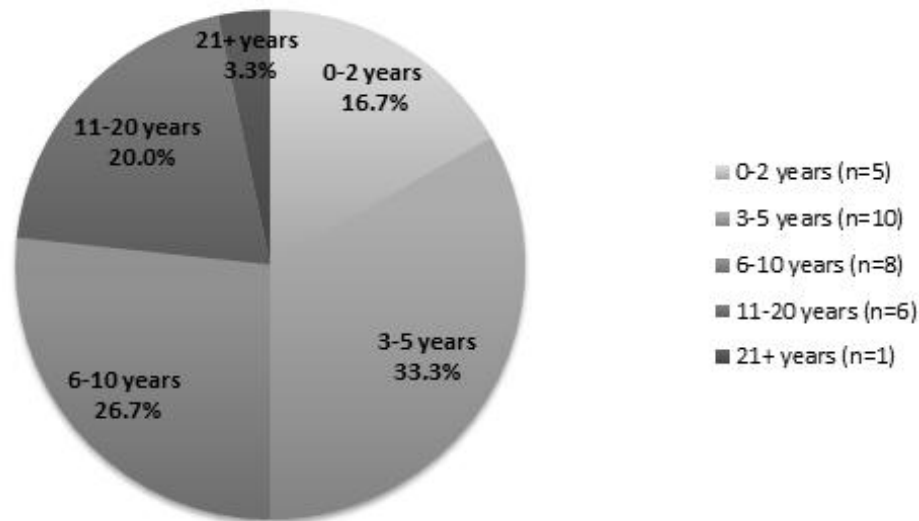
are not mutually exclusive and sum to more than the 30 total individual responses. The largest group represented, at over 41% of the sample, was CE program directors (n=20). The next largest group was faculty members (n=10) at over 20% of the sample, and directors of other programs (n=6) at over 12% of the sample. Five respondents indicated that they were assistant or associate deans, four were “other” staff members with different responsibilities (e.g., office administration duties), and two were staff members with community relations/development responsibilities. Only one respondent identified as a career services staff member.

In addition to identifying their professional role(s), CENet members were also asked to report the number of years they had worked in their current position. As demonstrated in Figure 2, the majority of respondents had either worked three to five years (n=10) or six to ten years (n=8). Five respondents acknowledged being relatively new to their positions, with zero to two years of experience in that role. Six respondents had spent eleven to twenty years in their current position,

**Figure 1: Professional Role(s) of Respondent**



**Figure 2: Number of Years in Current Position**



and one individual had 21 or more years of experience in their current role.

**Continuing Education Requirements**

One of the first survey items inquired about the CE requirements for social workers in the respondent’s state at the bachelors, masters, and clinical and/or advanced practice levels. Since the item did not specify the time parameters within which the hour requirements were to be met, some of the respondents’ reported total number of required CE hours may encompass more than one year.

**Bachelors of Social Work (BSW).** Table 1 presents data from the 22 programs that provided information regarding the BSW-level CE hour requirements. The average and the modal response (n=10) were both 30 required hours. Two respondents indicated that there were no CE hours required for BSW practitioners, and one program reported the sample’s maximum number of required hours at 57.

**Ethics (BSW).** The same survey item also asked respondents to indicate the number of ethics CE hours required for BSW-level practitioners. Eighteen respondents answered this item, leading to an average of four required ethics CE

hours. The modal (n=9) response was three hours. One respondent reported that their state does not require ethics CE hours for BSWs, and one reported the sample’s maximum number of required hours at 10 (see Table 2).

**Additional Requirements (BSW).** In addition to providing information regarding CE and ethics hours required for BSW practitioners, respondents were also asked to indicate if their states have any additional CE requirements for this educational level. Three respondents stated that their states require BSW practitioners to complete three hours of social and cultural competence, and two indicated that there is one hour of pain management CE required. Another respondent reported an additional requirement of two hours of boundaries. One respondent stated that their state requires one course on HIV every ten years, and a one-time domestic violence class. Lastly, one respondent indicated that three CE hours of supervision need to be completed by all BSW practitioners in their state.

**Masters of Social Work (MSW).** Respondents also provided information regarding CE requirements for masters level social work practitioners. The average number of required hours

Table 1  
BSW Continuing Education Hours

n=22		
Number of CE Hours	Frequency of Response	Valid Percent
0	2	9.1%
15	1	4.5%
20	2	9.1%
27	1	4.5%
30	10	45.5%
40	3	13.6%
45	2	9.1%
57	1	4.5%

Table 4  
Ethics Hours Required for MSW

n=21		
Number of Ethics Hours	Frequency of Response	Valid Percent
0	1	4.8%
2	1	4.8%
3	11	52.4%
5	3	14.3%
6	4	19.0%
10	1	4.8%

Table 2  
Ethics Hours Required for BSW

n=18		
Number of Ethics Hours	Frequency of Response	Valid Percent
0	1	5.6%
2	1	5.6%
3	9	50.0%
5	3	16.7%
6	3	16.7%
10	1	5.6%

Table 5  
Clinical and/or Advanced Practice Continuing Education Hours

n=25		
Number of CE Hours	Frequency of Response	Valid Percent
0	2	8.0%
20	1	4.0%
27	1	4.0%
30	13	52.0%
40	5	20.0%
45	2	8.0%
70	1	4.0%

Table 3  
MSW Continuing Education Hours

n=26		
Number of CE Hours	Frequency of Response	Valid Percent
0	2	7.7%
20	2	7.7%
27	1	3.8%
30	13	50.0%
36	1	3.8%
40	3	11.5%
45	3	11.5%
57	1	3.8%

Table 6  
Clinical and/or Advanced Practice Ethics Hours

n=21		
Number of Ethics Hours	Frequency of Response	Valid Percent
0	1	4.8%
2	1	4.8%
3	11	52.4%
5	3	14.3%
6	4	19.0%
10	1	4.8%

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reported by those who responded (n=26) was 31, while the modal number of required hours was 30 (n=13). The minimum number of required hours, reported by two respondents, was zero, while one respondent reported the maximum number of 57 required hours (see Table 3).

**Ethics (MSW).** Survey respondents were also asked to provide the number of required ethics hours for MSW-level practitioners in their states. Responses (n=21) indicated that the average number of required ethics hours for this group was four, while the modal response (n=11) was three. One respondent indicated that no ethics hours were required for MSW-level practitioners, while a different respondent indicated that ten ethics hours were required (see table 4).

**Additional Requirements (MSW).** The survey also inquired about any additional CE requirements for MSW-level practitioners. Four respondents indicated that three hours of social and cultural competence were required for this educational level. Two individuals reported three required supervision hours. Another common requirement, reported by three respondents, was an additional hour of pain management. One individual indicated that MSWs needed to complete two hours of boundaries. In addition, one person reported a requirement of six hours related to diagnosis and treatment. Lastly, one respondent stated that their state requires one course on HIV every ten years, and a one-time domestic violence class.

**Clinical and/or Advanced Practice.** Finally, the survey also asked respondents to provide information about CE requirements for clinical and/or advanced practice-level practitioners. Twenty-five individuals responded to this question, producing an average of 32 CE hours required for this group. The modal (n=13) number of required hours was 30. Two respondents indicated that there were no CE hours required for practitioners at this level, and the highest number of required hours reported by one respondent was 70 (see Table 5).

**Ethics (Clinical and/or Advanced Practice).** Respondents were also asked to report the number of required ethics CE hours for clinical and/or advanced practice individuals. The average number of required hours was four, while the modal

response (n=11) was three required hours. The fewest number of ethics hours reported was zero, while the highest number of ethics hours required was ten (see Table 6).

**Additional Requirements (Clinical and/or Advanced Practice).** In addition to providing information regarding CE and ethics hours required for clinical and/or advanced practice social workers, respondents were also asked to indicate if their states have any additional CE requirements for this educational level. Three respondents reported an additional three hours of social and cultural competence were required at this level. One hour of pain management was required by two respondents' states. Two participants indicated that three hours of supervision was additionally required. Other requirements included two hours of boundaries (n=1), ten hours of clinical content such as diagnosis and treatment (n=1), and six hours of diagnosis and treatment (n=1). One respondent reported the additional requirements of two medical errors hours each cycle and three hours of a domestic violence course once. Lastly, one respondent stated that their state requires one course on HIV every ten years, and a one-time domestic violence class.

**Online Hours.** The survey also asked respondents if part or all of a social worker's required CE hours could be completed online. Of the twenty-six individuals who responded to this question, all but one indicated that their states did allow practitioners to complete all or part of their CE requirements online. The average number of hours that were allowed to be completed online was 23, while the modal response (n=7) was 30 hours.

### CE Program Resources and Costs

**CE Staff.** In addition to asking about the continuing education hour requirements in various states, the survey also included items to assess the CE programs' abilities to manage and administer classes and workshops. The first component of program capacity was the amount of staff support available (see Table 7). Respondents reported the number of full-time and part-time paid professional staff, contract/temporary staff, and teaching assistants/student support. Twenty-nine respondents provided information regarding the total number of full-time paid professional staff. Most of them

(n=12) indicated that their program had only one full-time paid professional staff member. The average number of full-time paid professional staff members was also one. The highest number of employees reported for this category was nine, while seven programs reported having no full-time paid professional staff member. The modal response (fifteen individuals of the total 27 respondents) for the number of part-time paid professional staff was one, with an average of one as well. The maximum number of employees reported for this category was two (n=2), while the minimum was zero (n=8). The average number of part-time TA/student support staff members was one, with a modal response (n=13) of zero. The maximum number of individuals for this category was four. The modal responses for the rest of the staff categories were all zero, with averages for each of them of less than one. The highest number of employees reported for each of the remaining categories was four for full-time contract/temporary staff, two for part-time contract/temporary staff, and one for full-time TA/student support.

**Program Support.** Next, survey respondents were asked to indicate if their program was self-supporting. This item's purpose was to discover if resources used to operate the CE programs were generated by the programs themselves, external sources, or some combination of the two. Figure 3 presents the results from the 27 individuals who responded to this survey item. Over half of the respondents (n=16, 59.3%) reported that their programs were self-supporting. The next largest group, at 29.6%, indicated that their programs were partially self-supporting (n=8). For this group, the percent of the program that *was* self-supported ranged from a low of 20% to a high of 80%, with an average of 57% of the program being self-supported. Finally, three programs (11.1%) reported that they were not self-supporting.

A separate set of questions inquired about the external sponsorship of CE programs. Seven out of twenty-one respondents (33.3%) indicated that their programs received external sponsorships. The average number of programs within a CE department that had external support was ten. Another question asked if the CE program had an advisory board to help oversee and support its activities. Of

the nineteen individuals who responded to this question, eleven (57.9%) indicated that they did not have an advisory board.

Finally, respondents were also asked about their CE programs' budgets. Seventeen individuals provided this information, resulting in an average annual budget of \$133,456. A follow up question asked if the program's annual budget had changed in the last year. Eighteen individuals responded to this question. Fifty percent (n=9) indicated that their budget had not changed. Seven individuals (38.9%) reported that their annual budgets had decreased in the past year. The remaining two respondents (11.1%) indicated that their program budgets had increased in the past year.

**Cost of Program.** Another item associated with program finances is the cost to attend CE courses and the fees paid to CE course presenters (see Tables 8 and 9). The average cost of attending a half-day CE course was \$65 (n=26), while the modal response (n=6) was \$75. The price of attending a half-day CE course ranged from a low of \$25 to a high of \$90. The cost of attending a full-day CE course ranged from a low of \$25 to a high of \$168. The average amount paid by attendees for full-day courses was \$120 (n=26), while the modal response was \$75 (n=3).

Presenters for half-day CE courses were paid an average of \$397 (n=25), with a modal fee (n=10) of \$300. The maximum amount paid to half-day presenters was \$800, while the minimum was \$200. For full-day CE courses, presenters were paid an average of \$826 (n=23). However, some full-day presenters were paid as much as \$3,500 or as little as \$400. The modal cost (n=7) was \$600. These presenter fees do not include travel allowances.

#### **Number of Workshops**

Respondents were also asked to provide information regarding the number of workshops offered and the total number of attendees each year at these workshops. This data was separated depending on whether it was a full-day or half-day workshop (see Table 10). The highest number of half-day workshops was 125, while the lowest number was one. The average number of half-day workshops was 26 (n=22). The average number of full-day workshops provided by CE programs was 53

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Table 7  
*Number of Staff Employed by the CE Program*

Staff Description	Mode	Mean	Maximum	Minimum	Number of Responses
FT Professional Paid Staff	1	1	9	0	29
PT Professional Paid Staff	1	1	2	0	27
FT Contract/Temporary Staff	0	>1	4	0	24
PT Contract/Temporary Staff	0	>1	2	0	24
FT TA/Student Support	0	>1	1	0	25
PT TA/Student Support	0	1	4	0	25

(n=22). The most full-day workshops reported by a CE program was 350, and the minimum was one. Respondents also provided data for the number of attendees at these workshops each year. The average number of attendees at half-day workshops was 524 (n=20), the maximum was 3,400, and the minimum was fifteen. The highest annual total for full-day CE course attendees was 9,000 and the least was 15. The average number of annual attendees to full-day CE courses was 1,387 (n=18).

### Technology

Another important component of CE program success that was assessed by this survey was availability of technological resources. Respondents were given a list of technological tools and were asked to check all of the resources they had available to them. The most widely-used technological resource was websites (n=28), followed by the ability to post courses options online (n=22). Sixteen respondents indicated that they offered online courses, and twelve reported that they utilized course management and/or registration management software. Less common were having marketing resources, such as exam preparation materials or books, available online (n=6), offering courses that use a mix of classroom and online approaches (n=5), offering distance or correspondence learning (n=4), and offering webinars (n=4). Additional technological resources not included on the survey but mentioned by respondents in the comment section of this item were community outreach, a university's online registration system, a customer relations management system, and an online payment feature.

### Marketing

The survey also explored the marketing and advertising strategies utilized by the CE programs. Respondents were given a list of marketing and advertising approaches and were asked to check all they had used in their program. The most common marketing approach used was to post on an internet website (n=28), followed by using an email distribution list (n=21). Other noteworthy strategies included direct marketing emails (n=17), targeted mailings (n=16), formal program booklets (n=14), advertising in publications (n=13), and direct contact (n=10). Less commonly used was agency fliers (n=5). Additionally, respondents also reported using other marketing and advertising approaches not included in the survey's list of options. Social media sites such as Facebook, Twitter, Pinterest, LinkedIn, and blogs were mentioned by four respondents. Other approaches mentioned were digital monitors and having CE program schedule brochures direct readers to the CE program's website.

Respondents were also asked to indicate which marketing approach they felt was most effective at drawing in participants. A wide variety of marketing tactics were cited as most effective. Common responses included email distribution lists, targeted mailings, course catalogs, and website postings.

### Certificates and Other Professions

Survey respondents were asked if their CE programs offer certificates. Twenty-three of the twenty-five respondents for this question, or 92%, indicated that their programs do provide certifi-



cates. Some of the certificates mentioned by respondents include adoption case management, child/adolescent mental health, mediation, non-profit management, trauma-informed programs, child welfare practice, co-occurring disorders in adolescents, clinical supervision, aging studies, clinical addiction drug counselor (CADC), behavioral health service coordination, advanced psychodynamic clinical practice, and more.

The survey also asked if CE programs provided CE hours to other disciplines/professions besides social work. Twenty-four of the twenty-six respondents for this question, or 92.3%, indicated that their programs did provide CE hours to individuals from other professions. Some of the other disciplines mentioned were teachers, licensed professional counselors, nurses, psychologists, licensed chemical dependence counselors, licensed marriage and family therapists, and others.

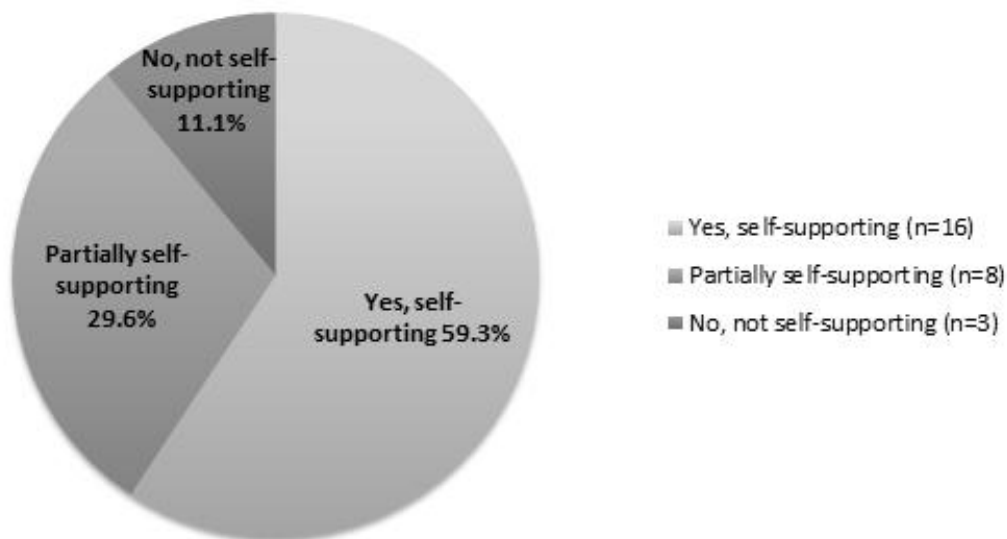
#### Course Topics

Another important part of the survey asked respondents about the course topics offered by their CE programs. Table 11 lists the “hot topics” mentioned by respondents. Each respondent was asked to provide three “hot topics” for their program and

the reasons why these courses were popular. The most frequently mentioned hot topics were ethics (n=6), the changes in the DSM-5 (n=6), and trauma-informed care and related topics (n=6). Five respondents indicated the licensure exam review and preparation courses were hot topics for their programs. Other frequently mentioned hot topics were spirituality in social work (n=3), clinical supervision (n=3), working with veterans and their families (n=2), domestic violence (n=2), dialectical behavior therapy (n=2), courses on the elderly (n=2), and substance abuse and clinical drug addiction (n=2). All other hot topics were only mentioned one time each.

In addition to hot topics, the survey also inquired about new topics being provided by CE programs (see Table 12). Each respondent was asked to report three new courses and the reasons these topics were now being offered. The most frequently mentioned new topic was the DSM-5 (n=4). Three respondents indicated that their programs were now offering courses in techniques for supervision and leadership. Other common new topics included trauma and trauma-informed care (n=2), nonprofit leadership and management

Figure 3: Program Self-Supporting



**Continuing Education Programs**

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Table 8  
*Costs Associated with Attending Half and Full Day CE Courses*

Category	Mean Cost (\$)	Mode Cost (\$)	Maximum Cost (\$)	Minimum Cost (\$)	Number of Responses
Half day: Amount participants pay	65	75	90	25	26
Full day: Amount participants pay	120	75	168	25	26

Table 9  
*Fees Paid to Presenters at Half and Full Day CE Courses\**

Category	Mean Cost (\$)	Mode Cost (\$)	Maximum Cost (\$)	Minimum Cost (\$)	Number of Responses
Half day: Amount paid to presenters	397	300	800	200	25
Full day: Amount paid to presenters	826	600	3,500	400	23

\*Fees do not include travel allowances

Table 10  
*Number of Workshops and Attendees Each Year*

Question Asked	Mean	Maximum	Minimum	Number of Responses
How many half day workshops do you offer per year?	26	125	1	22
How many full day workshops do you offer per year?	53	350	1	22
How many half day attendees do you have per year?	524	3,400	15	20
How many full day attendees do you have per year?	1,387	9,000	15	18

(n=2), culturally competent and ethical social work practice with LGBTQ individuals (n=2), and integrated health and mental health (n=2). The remaining new topics were only mentioned one time each.

Respondents were additionally asked to provide information about the topics that were cancelled and the reasons behind their cancellations (see Table 13). Each respondent was allowed to report three courses that were cancelled. Nine different cancelled CE courses were listed including using arts in prevention, addiction, bullying, gambling counseling, functional family therapy, eating disorders, introduction to play therapy, anything to do with self-care, and taming finances in tough times.

Lastly, participants were asked if they would be willing to fill out a detailed information sheet on their hot topics. Of the twenty-two individuals who responded to this question, ten (45.5%) indicated that they would not like to share information about their hot topics, seven (31.8%) said that they would be willing to share information, and five (22.7%) indicated that they would like more information (see Table 14).

### Limitations

One limitation to the data analysis in this report should be noted. The exploratory nature of this survey led to the formatting of the survey instrument in a way that allowed respondents to write-in answers to some questions, including those that asked for quantitative answers. Additionally, some respondents provided answers to quantitative questions in numerical ranges. For example, when asked the number of attendees at half-day CE courses, one respondent reported 1,150-1,200. In order to calculate and report statistics of central tendency (e.g. means, modes, etc.), the midpoint of response ranges were used. In the attendance example cited above, 1,175 was used as the number of half-day CE course attendees. In those few other cases where ranges were reported by participants, similar midpoint estimations were inputted for calculation purposes.

### Discussion and Implications

CE programs are an important part of the social work community. They allow social workers to best meet client needs and to comply with their

ethical responsibilities to remain competent practitioners. Furthermore, many states require social workers to complete CE hours in order to renew their licenses. There does exist, however, a large amount of variation in these requirements from state to state. For example, though respondents reported CE hour requirements as high as 70, two individuals indicated that their states had zero CE hour requirements for social workers, regardless of education level. It seems that some states place more of an emphasis on continuing education credits than others. However, averages gleaned from this survey do point to the importance of CE requirements for social workers in most areas surveyed. The average number of required CE hours was 30 for BSWs, 31 for MSWs, and 32 for clinical and/or advanced practitioners. Social workers across the country are making a significant time commitment to CE in order to continue to build and retain their professional skills.

### CE Staffing

The demand for programs that provide CE hours could not be met without the dedication of many professionals from this field. Of the CE program leaders surveyed for this project, nearly half (41.7%) identified as the CE director. Many of these individuals also perform other roles in their programs. In fact, 43% of all survey respondents indicated that they fulfilled two or more roles in their CE programs. These individuals are required to assume a variety of responsibilities within their institution. This may be the result of the small size of many programs surveyed. The sample average was just one full time paid staff member, though some individuals indicated that they did not have any full time paid staff members. The sample average for part time paid staff members was also one. Given the small staff size and the multiple roles performed by each staff member, it is fortunate that more than 83% of those surveyed indicated that they had three or more years of experience in their current positions.

More than half of those surveyed (59.3%) indicated that their CE programs were completely self-supporting—an impressive feat when considering the minimal number of staff members employed at the programs surveyed. Another large portion of

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respondents (29.6%) indicated that their programs were partially self-supporting, leaving only 11.1% of programs that were not self-supporting. Each of these programs also carried a high workload, as seen in the number of CE courses offered each year. The average number of full day courses offered by programs surveyed was 53, with an average of 1,387 attendees per year. The average number of half day workshops was 26, with an average of 524 attendees per year. Clearly program employees keep busy providing this crucial service for their communities on an ongoing basis.

### Presenter Cost

One key responsibility for CE program staff is finding and working with the individuals who teach or present on various topics. In order to attract qualified and engaging presenters, CE programs offer these individuals fees for their services. The average fee paid to full day workshop presenters was \$826, though they were paid as high as \$3,500 or as low as \$400. Half day workshop presenters received as much as \$800 and as little as \$200, with an average fee of \$397. These figures indicate that providing high-quality CE workshops led by experienced presenters could be a significant cost for CE programs.

### Technology

In addition to locating quality presenters, CE program staff can also increase their effectiveness by continually re-evaluating and improving the ways that they use technology to deliver services. Based on this survey, it appears that many CE programs have already begun the process of integrating technology into their services. Twenty-eight out of thirty respondents indicated that their program makes use of an online website, and twenty-two indicated that they have their course postings available online. Over half of the individuals surveyed also reported offering online courses. This survey also indicated that there is still plenty of room for advancement in this area. For example, only four programs offer webinars, and only four have distance learning/correspondence as an option. Other less commonly used technological resources were courses that blend classroom and online learning (n=5), having marketing resources available online (n=6), and using course management and/or registration management software

(n=12). In an increasingly technological world, busy social workers may expect and/or rely on resources such as webinars or distance learning to complete their CE hour requirements. Other resources, such as course management software, may also ease some of the work burden put on the limited number of staff members at these CE programs.

### Marketing

Electronic and virtual means of advertising continue to be cited as popular marketing approaches used by CE programs. The most commonly reported marketing approaches were websites (n=28), email distribution lists (n=21), and direct marketing emails (n=17). Somewhat less popular were print-based advertising methods such as targeted mailings (n=16), formal program booklets (n=14), and advertising in publications (n=13). Interestingly, only five respondents reported using agency fliers to market their programs. Most survey respondents indicated that electronic and virtual means of marketing, such as websites and emails, were the most effective means of drawing in participants. Additionally, these technological resources may represent a more cost-effective approach to marketing.

### Hot Topics

Another important part of the survey asked participants to share their programs' hot topics. Topic selection is important not only for meeting specific state requirements for social work CE hours, but also for attracting workshop participants. The three most common hot topics listed by survey participants were ethics (n=6), changes in the DSM-5 and its relation to social work (n=6), and trauma-informed care and other related topics (n=6). The ethics course is likely popular due to the specific ethics CE requirements in many states. The recent update to the DSM with the release of the DSM-5 explains the popularity of this topic. Many survey respondents indicated that the new version of the DSM was causing confusion and anxiety for their customers, and that the class was being offered in response to this perceived need. Trauma-informed care is also an increasingly important topic for mental health practitioners wanting to provide the best care possible to their clients.

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Table 11  
*Hot Topics and Reasons Why They Were Offered*

Topic	Frequency Mentioned	Reason (Blanks indicate no reason given)
Ethics	6	Licensure requirements
DSM-5 for Social Work; Changes in the DSM	6	New edition causing confusion and anxiety; Customer's demand
Trauma informed care and related topics	6	Major focus in mental health; Strong interest in this topic
ASWB Master's & Clinical Level Exam Preparation; Licensing Review Course	5	Community has high interest; Need to pass licensing exam to practice in NYC; Relatively few entities offer exam preparation help
Spirituality; Spirituality in Social Work	3	Consistent Interest; More interest in topic the past few years
Clinical Supervision Course	3	Requirement for social workers and licensed professional counselors in various states; Requested by registrants
Working with Veterans and Their Families	2	Meeting needs of veterans and families; Large veteran populations
Domestic Violence	2	We are a certified DV CEU provider; License Requirements
Dialectical Behavior Therapy	2	Skill based and strong presenter
Grief elderly; Elderly	2	Requested by registrants
Substance Abuse and Clinical Drug Addiction	2	We are a certified CADC CEU provider
Advanced Boundaries and Ethics	1	Mandated
Trauma certificate programs & workshops	1	Trauma counseling certificate programs; Trauma always a hot topic
HIV	1	
Women Who Lead-3 day Institute	1	Strong school reputation attractive to upcoming women leaders
Latino Conference	1	
Motivational interviewing	1	
Art therapy	1	Requested
Safety training	1	Needed for all social workers in the field after Jan 1, 2010
Neuroscience and social work practice	1	New knowledge not known by many social workers
Animals and Human Health	1	Growing trend in social work
Clinical practice	1	
Older adults	1	Large older adult population in WV
Human trafficking	1	This is a hot topic nationally and we have faculty with this specialty
Creative Writing	1	
Behavioral Health Service Coordination and Mentoring	1	New county human service competency training and certification
Renewing and Sustaining our Spirit of Service through Yoga	1	Self-care is important for social workers
Pain Management	1	Mandated
Spanish for Social Workers	1	Client populations
Executive Training	1	Social workers interested in advancing their careers
Field Education	1	Incentives for Field Instructors
Infidelity	1	
Diagnosis and treatment	1	A new requirement for licensure. We offer several different ones.
Dementia disorders	1	Important topic for professional and personal reasons
Training for Chinese Managers	1	Demand from China for training in western management practices
Burnout	1	Consistent interest
Specific Clinical Techniques/Mental Illness	1	One of few CE providers providing advanced clinical sessions
Medical Errors	1	License Requirements
Advocacy and Lobbying	1	Advancing our Sector
Intro to Managing Health Care	1	Health care is of interest to social workers and other professionals
Global human rights/interdependence	1	
Attachment	1	

## Continuing Education Programs

Table 12  
*New Topics for 2013-2014 and Reasons Why They Were Offered*

Topic	Frequency Mentioned	Reason (Blanks indicate no reason given)
DSM-5	4	Need for clinicians to learn about updates to the DSM
Techniques for Supervision/Leadership	3	In demand; Requested; Interest in the certificate
Trauma; Trauma-informed care	2	In demand; Requested through survey
Nonprofit leadership and management	2	Need for post-degree non-profit administrative training
Culturally Competent & Ethical Social Work Practice with LGBTQ Individuals	2	Unmet need, never addressed previously
Integrated Health and Mental Health	2	Major direction of behavioral health under Affordable Care Act
Bullying & Harassment in Schools	1	Emerging and important topic
Life coaching	1	
Program Evaluation Certificate Program	1	Customer Interest
Food insecurity	1	This is a hot topic nationally
Domestic violence	1	
Aging Intermediary Care Management	1	County agency on aging training certification initiative
Managing the Transition from Clinician to Program Manager	1	Address high % of clinicians who transition to managerial or program role with little training
Movie Nights with facilitated discussion	1	Participants looking for new ways to gain CEUs besides the typical lecture format
Immigration in Child Welfare	1	Commonly requested topic and response to a child welfare training need
CASAC training	1	Received external funding to launch and run program
Intro to Narrative therapy	1	
Global human rights	1	
Social work safety	1	New by law
Ethics	1	Required by state
Symposium on aging	1	Area of growing need for social work
Spirituality and social work	1	Result of past successful conferences
Disaster Planning for Service Agencies	1	Relevant in NJ post-hurricane
Forgiveness	1	
Brain Health for the 21st Century	1	Requested-High interest in gerontology
Specific clinical techniques with children	1	WV has many children in poverty and with special needs
CBT for Anxiety & Depression Certificate	1	Customer Interest
Equine assisted therapy	1	We have a presenter with lots of knowledge in this area
Medical Errors	1	
Cultural competence	1	New state requirement
Grant Writing for Social Workers	1	Budget cuts across the spectrum are hurting agencies and we want to teach social workers about federal funding opportunities
Self-Determination and Person Centered Planning	1	Addressing a commonly requested topic
Special needs offenders	1	
Adoption	1	
Treating sexually abused children	1	
Disability and social work	1	Result of past successful conferences
Vulnerable populations	1	Need
Behavioral health and substance abuse in Native American communities	1	Responding to a need for greater knowledge, awareness, and skill to address the needs of tribal communities in Michigan.
Program and policy implications	1	
Treatment issues with children and loss	1	By request
Pain management	1	Required by state

Table 13  
CE Courses Cancelled and Reasons Why

Topic	Frequency Mentioned	Reason (Blanks indicate no reason given)
Using Arts in Prevention	1	
Addiction	1	Low enrollment
Bullying	1	Low enrollment
Gambling Counseling	1	Reduced major focus, emphasis now on partnering for maintaining certification but significant number of gambling counselors now
Functional Family Therapy	1	Low enrollment
Eating disorders	1	No interest
Introduction to play therapy	1	Low enrollment
Anything to do with self-care	1	Agencies only paying for evidence based direct practice type of programming. Anything non-traditional or not evidence based is not acceptable at this point.
Taming finances in tough times	1	Not enough interest

Other hot topics mentioned were licensing review courses (n=5) and clinical supervision courses (n=3). Clearly licensure requirements drive much of the content of CE courses, as social workers strive to maintain their license to practice. Another commonly mentioned topic was spirituality in social work (n=3), reflecting the growing importance this topic has had over the past two decades in social work research, education, and practice (Barker & Floersch, 2010). Other hot topics mentioned more than once related to specific populations and interventions, including domestic violence, working with veterans, dialectical behavior therapy, the elderly, and substance abuse and clinical drug addiction.

**New Topics**

Respondents also provided information on the new topics they were offering for 2013-2014. Many of the hot topics provided by respondents were also new topics. For example, the most frequently mentioned new topic (n=4) was the DSM-5, which was also one of the top hot topics. The fifth and newest edition of the *Diagnostic and Statistical Manual of Mental Disorders*, which was released in May of 2013, contained many structural and organizational changes from the previous version, including the elimination of the multiaxial system and changes to diagnostic criteria for certain disorders (Wakefield, 2013). CE providers responded to this major change in the mental health field by providing courses to help social workers understand the changes and incorporate

them into their practices. Two other frequently mentioned new topics that also appeared on the hot topic list were techniques for supervision (n=3) and trauma-informed care (n=2).

Another frequently reported new topic was non-profit leadership and management (n=2). The reason given for adding this new topic was the need for post-degree, nonprofit administrative training. The other new topics that were mentioned more than once were culturally competent and ethical social work practice with LGBTQ individuals (n=2) and integrated health and mental health care (n=2). Survey respondents indicated that the first of these topics was introduced to address a previously unmet need. Competent and ethical work with LGBTQ individuals may represent a growing area of importance to practitioners as LGBTQ advocacy continues to gain prominence on a national level. The reason given for introducing the topic of integrated health and mental health care to CE programs was that this is a major direction of behavioral services under the Affordable Care Act.

**Discontinued Topics**

After providing information about hot and new topics for their CE programs, survey respondents were lastly asked to report which topics they were discontinuing. This information may be important for other CE providers who are considering adding new topics. They can review this list to do a preliminary assessment of whether a topic may have traction with social work audiences. Nine topics were listed as being discontinued, and each one

## Continuing Education Programs

Table 14  
*Willingness of Respondents to Share Details of Hot Topics*

n=22		
	Frequency of Response	Valid Percent
Yes	7	31.8%
No	10	45.5%
I'd like more information	5	22.7%

was mentioned only once. Cancelled topics included using arts in prevention, addiction, bullying, gambling counseling, functional family therapy, eating disorders, introduction to play therapy, self-care, and taming finances in tough times. CE providers may want to do further research into their own community's interest in these topics before offering them as part of their curriculum.

### Conclusion

The National Association of Social Workers' Code of Ethics requires social workers to maintain professional competence through continuing education. The importance of continuing education is further supported by the fact that almost all states have made completing a certain number of CE hours a requirement for licensure renewal. CE programs assist social workers in complying with ethical standards, maintaining their licenses, and providing the best services possible to clients. Although CE programs have proliferated across the country, there is often little or no communication or coordination among programs. This is problematic as it denies CE programs the opportunity to learn from each other's successes and mistakes. In order to begin to address this lack of coordination, *Professional Development: The International Journal of Continuing Social Work Education* developed and distributed a CE survey to programs affiliated with CENet in the fall of 2013. The results of this survey indicate that CE programs provide a great number of services to their communities while operating with very modest resources. The survey results additionally gave insights into various aspects of CE program operation, such as technological resources, marketing approaches, number of courses offered, hot topics, and more. The results of this survey can be used to begin

communication and coordination among programs that allows them to duplicate other programs' successes and avoid their missteps. This in turn will lead to better-trained social workers with an enhanced capability to meet client needs.

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