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### ABSTRACT

A study analyzed the continuing professional education (CPE) requirements, practices, policies, evaluation measures, and perception of impact on practice and participants in the counseling profession. Research was conducted in 22 states with at least 5 years experience with their counselor licensing legislation requiring CPE. Other states were examined for comparisons. All participants provided written information, legislation, and forms and completed a questionnaire. The majority of states required CPE and found mandated CPE had a positive impact on the general public, legislators, and insurance companies. Annualized CPE hours required ranged from 10-25. The majority of states did not regulate or evaluate CPE providers. States were at the least sophisticated level of CPE evaluation, using paper and pencil tests that measured participant satisfaction and to a limited extent change in knowledge. The majority of states had CPE processes that were formal, large group, and lecture based. There was considerable interaction between states and between states and national organizations concerning CPE practices. Recommendations included the following: using a random audit of CPE compliance records; developing criteria for CPE activities; allowing for more small group and individualized learning; teaching adult learning theories and practices to CPE providers; and developing processes whereby counselors may assess their needs and develop learning plans. (YLB)

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A Descriptive Study of Mandatory Continuing Professional Education in an Emerging Field: A Prospectus on the Counseling Profession

# **Executive Summary**

### Introduction

Much time and effort have been expended to develop state licensure requirements for professional counselors (e.g. license, certification, registry). Additionally, many states require a form of continuing professional education (CPE) to maintain this professional license. Although extensive research had been conducted concerning CPE with other professions, this has not occurred with counseling. This is due, in part, to the relative newness of both the profession and licensing legislation. This research was conducted with those 22 states that have at least five years experience with their counselor licensing legislation requiring CPE. Additional states that do not meet this criteria and the National Board for Certified Counselors (NBCC) were also examined for comparison.

# **Purpose**

The purpose of this study was to analyze the CPE requirements, practices, policies, evaluation measures, and perception of impact on practice and participants in the counseling profession. Additionally, issues such as development of the requirements, the impact of other professions' and states' requirements on this development, and the impact of research on adult education/learning were studied.

## Study

All participants in the research provided written information, legislation and forms, and completed a seven-section questionnaire either in writing or by telephone. Three states in various stages of implementing mandatory CPE, and five states and the District of Columbia who credential counselors and do not mandate CPE, also provided written materials and completed the questionnaire. The National Board for Certified Counselors' (NBCC) CPE practices were also studied. Numerous telephone calls complemented the written questionnaire to secure additional information and for clarification. The questionnaire included the following sections: General Information; CPE Requirements; CPE Process; CPE Evaluation; Teaching Methods; Adult Learning/Education; and CPE Evolution.

Summary of Findings

- -The majority of states required CPE from the initial stages of legislation and find that mandated CPE has had a positive impact on the general public, legislators, and insurance companies.
- -Annualized CPE hours required ranged from 10 to 25; 45% required 20 hours; states with voluntary legislation (usually certification) required significantly more hours (mean of 21.1 hours verses a mean of 16.0 hours in mandatory legislation states).
- -The majority of states do not regulate or evaluate CPE providers.
- -Criteria for providers and programs are based either on what is required by the national, sponsoring organization or on specific requirements included in the licensure legislation.
- -States are at the least sophisticated level of CPE evaluation, utilizing paper and pencil tests pre- and post-program, that measure participant satisfaction and to a limited extent change in knowledge. There are no efforts to assess either changes in actual behavior/practice or impact on clients, both more advanced methods of evaluating.
- -Those states that perform a random audit of applicants for relicensure do not sacrifice accuracy and appear to catch more errors, perhaps due to an increase in available time and staffing.
- -Most states include viable appeal processes for providers and counselors.
- -The majority of states have CPE processes that are formal, large group and lecture-based. There are several states, more rural and western, that allow for higher levels of informal, small group and individual learning processes.
- -Thirteen of the states limit specific forms of learning, such as self-directed activities, supervision and publishing. Five others do allow some of these forms of learning (one through NBCC) while the remaining five do not allow these forms of learning.
- -Some states use CPE in an ill-focused attempt to rectify violations in legal and ethical matters.
- -NBCC has had a major, on-going impact on the CPE practices in the states.
- -Adult education theories and practices have had little impact on the development of CPE. The issues of (1) laggards (i.e. professionals who do not continue to update their skills) and (2) motivational theories, were the two concepts known to several states.



- -There is considerable interaction between states, and between states and national organizations concerning CPE practices.
- -No state met the American Counseling Association's (ACA) model for CPE. This model appears to be limited in its impact and applicability.

# Summary of Recommendations

**Current System Recommendations** 

- 1. Utilize a random audit of CPE compliance records, accuracy is not compromised.
- 2. Develop established criteria for CPE activities, do not "judge" these activities after they have been submitted.
- 3. Only require the ACA model's CPE hours, 25 annually, if a wider range of options for learning are utilized (e.g. individualized, informal, small group).
- 4. Do not use CPE to "punish" counselors that violate ethical or legal statutes. For example, do not believe that counselors that have dual relationships (i.e. are sexual with clients) can be "rehabilitated" through CPE processes in ethics.
- 5. States in the process of developing or changing CPE requirements might consider utilizing NBCC approved programs if they do not have the resources to develop and monitor programs through their own staff.

# **Future Development Recommendations**

- 6. States need to consider allowing for more small group and individualized learning processes.
- 7. States that do not require CPE should consider the following benefits: mandated CPE creates a positive image; specific learning methods have been found to impact both participant's behavior and to have an impact on clients; and CPE does impact laggards.
- 8. States need to ensure that CPE providers are well versed in adult learning theories and practices.
- 9. As states mature in their CPE processes, evaluation needs to focus on measures of both change in the participating counselor's behavior and client impact.
- 10. Processes need to be developed by the states whereby individual counselors are able to both assess their needs and develop a learning plan for their professional life.



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