

# **Mandatory Continuing Education - Does it work?**

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... Most states require some form of mandatory continuing education in order for licensees to renew their licenses. What relationship do these mandates have to the state's interest in protecting the public? What studies do licensing boards typically initiate to determine whether these mandates help to reduce the number or severity of disciplinary actions against licensees? Are there better and more substantive alternatives to the current system? Are mandates really needed?

As to the last question, I have always remembered the results of surveys that were done by a large professional association of mental health professionals. Prior to the imposition of mandatory continuing education, licensees were averaging between 48 and 51 hours per year of continuing education. After the imposition of mandatory CE, in the amount of 36 hours every two years, the survey showed that members were averaging between 18 and 20 hours per year of continuing education. The state imposed a minimum, and the profession complied. Therapists and counselors should understand that if they are ever sued, a common line of questioning by opposing attorneys involves continuing education. Attorneys will ask about how much continuing education was gained and the nature of the continuing education, especially as it relates to the treatment or issues involved in the case they are handling. Compliance with only the minimum requirements can be made to look like a negative.

It is my impression that licensing boards rarely conduct or initiate studies to determine the effectiveness of mandatory continuation education. Further, it is my opinion that if such studies were done, it would be shown that these mandates do not help to reduce the number or severity of disciplinary actions. Many disciplinary actions are taken by state licensing boards for intentional violations of the law - such as, but not limited to, sexual relationships with patients, insurance fraud, conviction of a crime substantially related to the qualifications, functions or duties of a licensee, and intentional failure to report child abuse because the practitioner believed it would not be in the best interests of the patient to file a report. In these cases, and others, continuing education is not the issue!

There are many criticisms directed at continuing education mandates in the various states. In many states, CE is micromanaged and in some respects insulting. Limitations exist in some states that do not allow licensees to claim credit for perfectly good learning activities, such as reading an authoritative book or obtaining consultation on relevant subject matter. Of course, changes can always be proposed and a more rational, effective, and respectful system can be achieved.

One idea proposed by a renowned expert on CE is that there would be no mandatory continuing

education, but licensees would be required to take a test every five years to determine whether or not they are knowledgeable in certain critical areas, such as law and ethics. If the licensee fails the test, the license must be reissued, but the licensee would only then be required to complete continuing education requirements consistent with the areas of deficiency. Licensees and professional associations have not been quick to jump on this idea!