Literature Review

Models of Continuing Professional Development for Social Workers

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Introduction
1.1 INTRODUCTION

The theme of ‘Continuing Professional Development’ (CPD) for social work practitioners seems to have been accorded great attention in the social work literature, especially more recently. In particular, a number of influential policy documents have been published in countries such as New Zealand, Britain, Australia and the United States, which outline changes to the CPD system that have been implemented in these countries in recent times. Indeed, the literature on CPD seems to be at a much more advanced stage in other countries when compared to the Irish context. As well as the policy documents, other research work has been published on the challenges of implementing new CPD measures, such as the problems that can occur due to lack of ‘alignment’ between CPD objectives that are advanced by national bodies, and the goals of management on the ground, who are responsible for overseeing implementation (cf. Beddoe 2006, 2009). As well as this, other studies have looked at the practical issues that are experienced by social workers when undertaking different types of CPD training and matters to do with service delivery once CPD is completed (Smith et al. 2006). As a result, this literature review draws principally on this literature from other countries and it does this in order to make suggestions for future research that might be undertaken in Ireland on CPD, which may also inform social work practice.

This chapter is divided into three principle sections. The first section attends to definitions of CPD that have been advanced in the social work literature and outlines some of its advantages that are frequently alluded to in the literature (1.2). Secondly, the chapter outlines some of the recent changes to social work CPD practice that have taken place in the countries listed above (1.3). The final section looks at some of the literature that deals specifically with implementing new CPD practices and makes suggestions for further research in Ireland.

1.2 DEFINITIONS OF CONTINUING PROFESSIONAL DEVELOPMENT

It seems important to define Continuing Professional Development (CPD) as numerous definitions of the term have been advanced in the literature. In the United States, for example, the term ‘Continuing Education’ is frequently used and this seems to be synonymous with CPD in many respects. Indeed, many of the definitions that have been put forward in the literature seem highly interesting for reasons that will also be discussed here. One of the most cited approaches to CPD appears to be that which is offered by Madden and Mitchell (1993: 3) as ‘the maintenance and enhancement of knowledge, expertise and competence of professionals throughout their careers according to a formulated plan with regards to the needs of the professional, the employer, the profession and society’. This definition is interesting for a number of reasons. Firstly, it draws attention to the many advantages of CPD (improving knowledge, skills and practices of social work professionals). Secondly, it conceptualises CPD as an ongoing and recursive process that takes place throughout one’s professional life. Thirdly, it draws attention to the importance of enhancing CPD as it enables professionals to meet the objectives of their employers, the social work profession and service users. Fourthly, it draws attention to planning and the need to plan effectively in order to devise CPD courses and modules that will be effective.
Planning is essential at all stages of the CPD process as the courses that are offered must be appropriate and should be of the highest standard in order to ensure that the organisation, the participant (social worker) and service users benefit. Interestingly, the literature on CPD also advances the view that the courses taken by participants should be appropriate to the work that is undertaken by individual social workers in everyday life. As a result, it seems that completing a Training Needs Analysis (TNA) in individual organisations may be appropriate for determining the courses that are needed in specific locations. However, a certain amount of consultation seems necessary with the Irish Association of Social Workers (IASW) and other bodies when completing the TNA. Indeed, it seems important for the wider policy context to be taken into account when devising and implementing new CPD arrangements (cf. Bolam 2000).

Other approaches to CPD have also been advanced in policy documents of official bodies representing social workers. However, in many ways some of these approaches echo some of the sentiments about CPD that are evident in Madden and Mitchell (1993). In this way, there appears to be considerable crossover between definitions of CPD that are put forward in the academic literature and in official documents from different countries. Indeed, it would be interesting to complete a much larger research project on similarities and differences between concepts of CPD and CPD practices across different countries and regions. An important policy document by the Social Workers Registration Board (SWRB) in New Zealand, which is entitled Continuing Professional Development for Registered Social Workers (2010) defines CPD in a similar way to Madden and Mitchell (1993). In addition, this definition is interesting as it draws attention to some of the challenges that can occur when devising a new CPD model. For example, it draws attention to the need to align CPD with the goals of different agencies, policies and the need for buy-in and commitment for action at all levels of the organisation:

- CPD is a self-directed cyclical process that requires critical reflection;
- It incorporates a range of learning activities to meet individual learning styles;
- It is aligned with individual professional aspirations and agency goals;
- CPD benefits the practitioner as well as the client/service/service user;
- It requires a commitment from and is a shared responsibility between the practitioner and the professional supervisor/manager;
- It is a medium to ensure accountability to clients and the profession;
- It is appropriate to the level of experience of the practitioner (SWRB, 2010: 1).

There are a number of other interesting features of this approach to CPD by the SWRB. In particular, conceptualising CPD as a cyclical and self-directed process draws attention to the continuity of CPD and the concept of lifelong learning and implies that there is a need for practitioners to continually update skills throughout their professional lives. It is also important to note that conceptualising CPD as a self-directed process seems to place much of the onus on social workers themselves to actively seek out and complete CPD modules and courses that they deem as appropriate to their work. Indeed, this emphasis on CPD as a self-directed process is a key feature of the New Zealand CPD system and will be discussed later in this review.
Significantly, *Continuing Professional Development for Registered Social Workers* (2010) also accepts that there are many different types of CPD that are recognised by the Social Workers Registration Board (SWRB) in New Zealand. These include courses, conferences, workshops, seminars, professional reading, research, supervision or mentoring. Under the New Zealand system, all of these CPD activities carry equal weighting. This gives the candidate considerable scope in deciding on the particular course that suits her/him best. This is also interesting for another reason as it draws attention to the importance of ‘informal learning’; how people learn from each other at conferences, workshops, etc. and how they learn from mentoring situations. As well as this, modules on other topics outside of social work may also be deemed acceptable to the SWRB as CPD if they are part of the social workers’ everyday practice and/or assist in her/his professional development. Again, this gives the social worker considerable scope in determining which courses/modules work best for her/him at various stages of their careers.

The document *Continuing Professional Development for Registered Social Workers* (2010) also outlines the importance of the following activities for CPD – work-based learning activities, professional activities, formal education and self-directed learning. Some of the examples that are given of work-based learning activities include in-service training and peer review. Professional activities can include involvement in a professional body or acting as an assessor. Formal education covers participation in seminars, distance education or further education. Reading and reviewing journals or books is covered under ‘self-directed learning’. This reiterates the points that were made previously about flexibility that seems to be inherent in the New Zealand system to some degree, as it gives the social worker some leeway in determining the type of study and the mode of delivery that is right for her/him at different times during their career.

Key policy documents from the United Kingdom, such as the highly influential *Keeping Up the Good Work* (2010), have also adopted a comparable approach to CPD as the SWRB. *Keeping Up the Good Work* defines CPD as an ‘ongoing, planned and developmental process that contributes to work-based and personal development. It enables workers to expand and fulfil their potential, and it ensures continuing confidence and competence, particularly in ever-changing environments … which means better quality experiences for people who use services’ (Skills for Care 2010: i). This definition of CPD seems significant because it implies that there is a need to deliver CPD courses and modules that help to improve the confidence and skills-base of social workers. The CPD courses on offer should enable them to adapt to, and work in, different situations, and the courses should also have considerable pay-off for service users. It also defines CPD as ‘planned learning and development activity that develops, maintains or extends knowledge, skills, understanding or performance’ (Skills for Care 2010: i). In addition, it draws attention to the many advantages of CPD as it states that CPD ‘is relevant to workers in organisations of all types and sizes, including micro employers and those who manage their own services’. Specifically, the document also states that effective CPD is advantageous because it contributes to improved services for end users, improves flexibility in service delivery, enhances the qualifications of the workforce, helps social workers to ‘fulfil their potential’ and that it leads to ‘better recruitment and retention’ (Skills for Care 2010: 1). Importantly, other studies and reports also advocate that enhancing CPD among social
workers has similar advantages for professionals and for the social work profession as a whole (cf. Preston-Shoot 2007). As well as this, publications such as Higham (2006: 201) highlight some of the reasons why social workers should maintain the highest standards of professional practice and should upskill when appropriate:

Social workers combine multiple roles (e.g. planner, assessor, evaluator, supporter, advocate, protector, and manager) that balance empowerment and emancipation with protection and support. The essence of professionalism lies in developing the capability to select and combine appropriate social work roles for particular situations. Social work’s distinctiveness is found in its holistic practice with different situations and people, a valuable attribute for developing multi-professional partnerships, now required for better service provision.

Interestingly, the above quotation from Higham (2006: 201) calls attention to the many different roles that are fulfilled by social workers in various contexts, and the need to devise CPD courses and modules that help people to develop and flourish in these roles. Hence, it seems that these roles should be taken into account when devising and implementing a model for CPD.

Significantly, *Keeping Up the Good Work* (2010) seems to go farther than previous UK reports in defining CPD as it pays attention to the ways that informal activities can contribute to CPD. According to this document; “The traditional focus on formal training courses and qualifications ignores the wide range of other activities that can also contribute to effective CPD. CPD for the social care workforce ought also to include any development opportunity which contributes directly to improving the quality of service and improved outcomes for people who use services” (Skills for Care, 2010: 5). Hence, this seems to compare with the New Zealand model, which also recognises the importance of informal learning to CPD. Again, this introduces a significant amount of flexibility for participants in CPD.

As a result, *Keeping Up the Good Work* (2010) advocates that CPD should also include the following:

1. Induction and statutory training;
2. Work-based learning (supervision and other opportunities at one’s place of work, such as in-house courses, job-shadowing, secondment, mentoring, coaching);
3. Qualifications required for registration or to meet CQC (Care Quality Commission) requirements;
4. Post-registration training and learning (PRTL);
5. Post-qualifying training for social workers;
6. Formal learning leading to awards, certificates and diplomas recognised under the Qualifications and Curriculum Framework (QCF), or higher education qualifications;
7. Informal learning and learning through experience in life and work;
8. Reflection on what has been learned from planned and unplanned experiences in work (Skills for Care 2010: 5).
A significant report by the Scottish Social Services Council (SSSC) entitled *Continuing Professional Development for the Social Service Workforce* (2004) also provides a comparable definition of CPD. This report conceptualises CPD as ‘encompassing a wide range of activities which contribute to the lifelong learning of all social service workers. It includes academic and practice development and, equally important, informal learning and learning and development in the workplace and any development which contributes directly to improving the quality of care received by service users’ (Scottish Social Services Council 2004: 17). Interestingly, this definition explicitly mentions ‘informal learning’ as an important strategy for CPD.

The report *Continuing Professional Development for the Social Service Workforce* (2004) also lays down a number of objectives for CPD in Scotland such as the need to improve the effectiveness, quality and relevance of learning, to encourage employers to utilise a range of social workers’ learning and to ensure that workers achieve the qualifications required for registration with the SSSC. Such objectives should not simply be ‘glossed over’. Ensuring that the learning is *effective*, of *high quality* and that it is *relevant* is very important for social workers who partake in CPD and for service users. In order to encourage social workers to continually partake in such courses, it is necessary for the modules to reach each of these criteria. Otherwise, taking part in these courses may seem ‘fruitless’ to the learners. Hence, when planning and implementing CPD, it is important to pay due attention to these terms and how individual modules fit with such criteria.

### 1.3 CPD FOR SOCIAL WORKERS IN OTHER COUNTRIES

This section shall now proceed to discuss some of the interesting features of CPD models from other countries. Most notably, it shall assess CPD models from New Zealand, Australia, the UK and the USA. These countries were chosen for inclusion in this chapter due to the sheer volume of documents and articles that are available on CPD among social workers and that focus specifically on these contexts.

#### 1.3.1 NEW ZEALAND

Recently, the CPD model from New Zealand has been given extensive attention in a number of sources, most notably *Continuing Professional Development for Registered Social Workers* (2010). Some of the interesting features of the New Zealand CPD model are as follows: The Social Workers Registration Board (SWRB) requires that every registered social worker complete a minimum of 20 hours’ CPD training per year. This document outlines the Board’s position on what this training should entail and what CPD means in the context of New Zealand social work practice. The Board advocates that a social worker who is employed for approximately 20 hours a week should complete 20 hours of continuing professional development to ‘maintain and enhance their knowledge, expertise and competence throughout their careers’ (Social Workers Registration Board 2010: 1). It also advocates that social workers who are engaged in full-time employment must complete more than 20 hours’ CPD training.

In New Zealand, social workers also have to renew their Annual Practising Certificates. As part of this system, they must also confirm to the Social Workers Registration Board that they have reached these CPD training requirements. Social work practitioners are required
to keep a log book of their training progress and this must be included in their application for renewal of their Practising Certificates. As a result, registered social workers must keep an accurate record of their CPD training at all times. This ensures that there is some level of transparency in the system but it also has benefits for the social workers who take part in the training. Reflecting on the training undertaken from time to time means that people may be more aware of the skills and knowledge forms that they have built up and how they may be transferrable to other situations.

In 2014, the Aotearoa New Zealand Association of Social Work also released a policy statement entitled *Continuing Professional Development: Policy* (2014), which complements the document mentioned previously on CPD training in New Zealand. As a result, this document adopts a similar definition of CPD as the documentation listed previously from the New Zealand context.

At the same time, however, this policy statement is important as it provides some further details on the CPD system in New Zealand. For one thing, it discusses the audit system on social workers’ CPD that exists in New Zealand. Under this system, the Board will audit five per cent of the CPD logs/portfolios that are submitted by social workers who are seeking re-certification. Under this model, however, the social workers shall be informed when they have been selected for audit. As part of the New Zealand model, practitioners are asked to submit two copies of their CPD log/portfolio, one for the competence assessment and one for the CPD auditor. Once again, this ensures that there is greater transparency at all stages of the CPD process and encourages social workers to reflect on their training.

### 1.3.2 Australia

The Australian Association of Social Workers (AASW) is the professional body that represents social workers in Australia and it plays a key role in developing professional standards for social workers. According to the AASW Code of Ethics:

> AASW members are committed to ‘... participating in and contributing to their own life-long learning, education, training and supervision, and that of other social work practitioners and students (AASW, Code of Ethics 2010: 13, cited in AASW 2011–2012: 1).

In 2011, the AASW launched a trial of the 2011–2012 CPD Policy, which established minimum CPD requirements for all members of the AASW. A recently published Discussion Paper on CPD in Australia also states that ‘the AASW ‘is committed to developing a CPD policy that supports all members and strongly encourages members to contribute to the development process by providing feedback’ (AASW 2012: 3).

This Discussion Paper also documents some of the feedback that was given to the AASW by social work professionals in response to policy changes on CPD. It provides lists of questions for AASW members to answer that relate to some of the problems that are experienced by social workers with regards to CPD policy. As such, this system seems to encourage critical reflection from social workers on their experiences of CPD and some degree of participation from them on how the current CPD model can be improved farther.
A number of recommendations have also been made by the AASW regarding CPD practices as a result of these changes in policy:

1. All members should be required to submit evidence of having taken part in CPD training;
2. Greater attention should be given to reflective practice and career planning;
3. Individual branches of Continuing Professional Education (CPE) Committees should be given greater support (AASW 2012: 4).

Again, these recommendations need to be looked at in more depth. For one thing, the emphasis on ‘reflective practice’ and ‘career planning’ are very interesting. They actively encourage social workers to think about their roles and to reflect on how the types of CPD training that they complete fit with their own identity as ‘social workers’ and with their everyday work practices. There are also options available for registered social workers online where they can ‘manage’ their CPD portfolios. This increases ease of access, particularly for rural social workers in Australia.¹

The major change in the 2011–2012 CPD Policy by the AASW is the introduction of a CPD requirement for all members (excluding fully retired and student members). All other members must accumulate 30 CPD points each year, with 10 points in each of the three activity categories that are laid down by the Board.

Furthermore, the new 2011–2012 CPD policy does not discriminate between those working part time and those working full time. As a result, there are no reductions in the requirements for those working on a part-time basis. Up to this point in time, for both Accredited Social Worker and Accredited Mental Health Social Worker statuses, the requirements were much lower, at 45 points, for those working part time.

Interestingly, this Discussion Paper also alludes to some of the potential barriers or challenges to implementing new CPD measures in Australia. In particular, it discusses issues of access to CPD opportunities, the awarding of CPD points and temporal and financial challenges for members, especially those working part time. While some of these challenges may be applicable mainly in the Australian context, they or similar challenges might also be applied to Irish social work, at least to some degree. As will be argued later in this chapter, more research is needed in Ireland on social workers’ experiences of CPD and the factors that affect their participation in such training.

This document also reinforces the importance of CPD for Australian social workers and states that ‘employers, government and industry’ recognise the value of professional development among social workers:

Establishing minimum CPD requirements supports the professional standing, recognition and value of AASW Membership. Employers, government and industry already recognise that eligibility for membership of the AASW is the benchmark for qualified social work. This is a result of the strong standards and requirements which members meet in completing their AASW Accredited Social Work degree. Requiring all members to complete professional development builds on this strong foundation.

¹. See http://www.aasw.asn.au/cpd-record
and will be an aspect of membership that will be widely communicated to government and industry to further demonstrate the expertise and professional standing of AASW members (AASW 2012: 5).

1.3.3 CPD FOR SOCIAL WORKERS IN THE USA

The website of the National Association for Social Workers (NASW) in the United States contains detailed information about standards for CPD in the US. Firstly, it should be stated that the site outlines the position of NASW on CPD and recognises its importance for acquiring new knowledge and enhancing professional attitudes among social workers:

The National Association of Social Workers (NASW) views continuing education as an essential activity for ensuring quality social work services for clients. By consistent participation in educational opportunities beyond the basic, entry-level professional degree, social workers are able to maintain and increase their proficiency in service delivery. New knowledge is acquired, skills are refined, professional attitudes are reinforced, and individual’s lives are changed.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

Such sentiments about CPD and Continuing Education also appear to be echoed in the NASW’s Code of Ethics, which recognises that ‘continuing education provides the social worker with the opportunity to acquire new information’ as well as recognising some of the skills that CPD instils:

Social workers practice within their area of competence and develop and enhance their professional expertise. Continuing education further provides the social worker with the opportunity to acquire new and necessary information; demonstrate a conscious self-directed and continuous effort toward personal and professional development; strengthen qualifications for professional licensure, certification, or registration; meet changing career demands; and explore new careers in social work.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

As part of the United States CPD system, social workers are required to take responsibility for their own professional training. However, the NASW recognises that there is a need for standards and regulation in CPD to protect social workers and help them to develop professionally.

The website lists a total of nine standards; three are for social workers, four are for providers of Continuing Education (CE) and two are for administrators. The site also states that the aims of these standards are as follows:

- To maintain and enhance the quality of services that social workers provide;
- Establish professional expectations so that social workers can monitor, be responsible for, evaluate, and improve their continuing education;
- Assist social workers in their selection of continuing education offerings of assured quality;
- Enhance the quality of continuing education for social workers;
- Facilitate opportunities for social workers to participate in continuing education;
- Help facilitate and guide program planning.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

The standards for social workers are as follows:

1. Social Workers Shall Assume Personal Responsibility for Continuing Professional Education;
2. Social Workers Shall Complete 48 Hours of Continuing Professional Education Every Two Years;
3. Social Workers Shall Contribute to the Development and Improvement of Continuing Professional Education.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

Looking at these standards in greater depth, we shall turn to the first standard listed above. The website states that the social worker has a threefold responsibility for determining the content and course of continuing education: a responsibility to clients, to self, and to the profession. This responsibility can be demonstrated by

- Identification of one’s own learning needs;
- Self-direction in meeting one’s own learning needs through pursuit of and participation in relevant continuing education activities;
- Active involvement in the learning process afforded by each continuing education experience;
- And/or assessment of knowledge gained from continuing education and application of that knowledge to practice.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

The first standard seems to require further discussion for a number of reasons. The US system seems to compare with the New Zealand model, which views CPD as a type of self-directed learning, where the onus is on the individual to seek out and take courses when necessary.

On Standard 2, the NASW recognises the following as Types of Continuing Education:

- Formally organised learning events;
- Professional meetings/organised learning experiences;
- Individual professional activities.
The CPE Standards of the NASW were published in a document entitled *NASW Standards for Continuing Professional Education* (2003). It states that ‘the three broad types of continuing education described below are necessary to help the social worker achieve a well-balanced learning experience. Although there are factors, such as availability and accessibility that may interfere with a social workers’ ability to participate in events across all three types, whenever possible, the social worker should map out a continuing education plan that encompasses all three’ (NASW 2003: 12). Social work practitioners are obliged to record this in order to ‘monitor progress toward achievement of a well-balanced learning experience’. Again, this compares markedly to the Australian and New Zealand models of CPD where social workers are asked to record details of their training.

As stated above, Standard 3 states the following; ‘social workers shall contribute to the development and improvement of continuing professional education’.

According to the NASW, this may take the form of:

- Participation on a continuing education committee sponsored by NASW or an accredited program of social work education;
- Recommendations to providers of continuing education on topics that could meet social workers’ specific learning needs or that reflect current social work practice issues;
- Communication with providers of continuing education on how they could meet social workers’ expectations and educational needs after announcements about upcoming events or after participation in the events;
- Submission of written evaluations at the close of the continuing education activities, including recommendations for future activities;
- Direct provision of continuing education in areas of expertise.

(Source: http://www.socialworkers.org/practice/standards/sw_case_mgmt.asp)

This third standard is interesting (*social workers shall contribute to the development and improvement of continuing professional education*) because it implies that there is some degree of flexibility in the system in the United States also. It is important to note that Standard 3 also seems to acknowledge the importance of participating with social workers on the ground in order to further improve Continuing Education (CE). For example, the second bullet point listed above mentions that social workers can make recommendations to CE providers on topics and that they can prepare evaluations after taking part in CE activities. It is important to mention, however, that this participation should have demonstrable effects on practice. It is one thing to encourage participation from social workers, however, people often become disheartened if they make suggestions for improving systems that are not taken account of. Therefore, if such measures were introduced in Ireland it would be important for the system to be flexible enough to take these suggestions into account.
1.4 IMPLEMENTING CPD: CHALLENGES AND OPPORTUNITIES

While there is much literature on the topic of CPD and on the training models that exist in other countries, there appears to be a very sparse literature on some of the issues that might be encountered when implementing CPD and the factors that (adversely) affect implementation. Some research does exist, which alludes to these matters in other countries to some extent. However, there appears to be little or no research on this topic in Ireland. As well as this, the international literature does not appear to be at a well-developed stage. As a result, this chapter contends that qualitative studies on how certain social and cultural factors affect the CPD model in different countries would enhance the literature greatly. In particular, there appears to be a gap in the literature for studies on the attitudes of individual social workers towards CPD and the challenges that they might face when trying to incorporate it into their practices. Such research could shed light on factors that may be culture-specific to Ireland, at least to some degree, which might affect CPD in this context but not in others. As well as this, the Irish and international literature would also be improved by studies of the degree of ‘alignment’ between those advancing CPD in Ireland and the goals and objectives of individual social workers and management on the ground. Hence, an immense amount of research could be completed on these topics, which could also help to improve the overall understanding of how practitioners view CPD and on the challenges that social workers face. Such research could also have positive effects on service delivery.

Looking at the existing literature on CPD, the following might be concluded about the effective implementation of CPD training models. It seems that effective implementation frequently relies on a complex interplay of factors, some of which may be classed as organisational and/or individual. It is also important to remember that what is termed effective participation by one organisation may not be the same as what is meant by effective participation by another. Therefore, some agreement would need to be reached on this by different actors as the system is being devised and rolled out. The following factors can affect CPD in a number of ways:

**INDIVIDUAL**

1. Attitudes of social work management towards CPD;
2. Attitudes of individual social workers towards CPD;
3. Attitudes of trainers towards CPD.

**ORGANISATIONAL**

1. CPD goals, policies and objectives of national social work bodies;
2. Beliefs and attitudes about CPD among various actors (organisational culture).

Obviously, there are other factors that could be mentioned here such as the broader policy context in Ireland on CPD. Indeed, a complete review could be written on how these factors intersect and how the policy context shapes CPD. However, even the brief list of factors mentioned above point to the ways that CPD is contingent on context and that many, many factors need to be taken account of when revising or implementing a new CPD model.
This chapter contends that the greater the degree of ‘alignment’ or ‘coalescence’ that prevails between these factors, the higher the chances are for successful implementation. As well as beliefs and attitudes, however, implementing a model of CPD that works in practice requires a commitment towards action on behalf of every member. This is critical because, while CPD can become part of policies for social workers, it needs to become ingrained in the organisational culture and in people’s practices and minds. This can take much longer to achieve and requires careful planning and concerted action on the part of the organisation. Further research is also important. Much can be learned also from the experiences of other countries and the problems that they have faced when implementing new CPD models. As a result, this chapter would recommend that a certain degree of networking and knowledge-sharing between researchers and social work bodies in different countries is necessary. This could also have many positive effects for research on social work in Ireland.

As stated previously, some research does exist on factors that affect implementation and on how CPD affects the lives of social workers, although such research seems to focus mainly on other countries. Studies like this are important as they highlight that changing the CPD model is not a one-dimensional process and that its acceptance among social workers depends on a myriad of contextual factors. Beddoe (2006) focuses on social workers’ feelings about CPD in New Zealand and the factors that affect the implementation of CPD. This work makes important points about the different types of social norms and conventions that social workers have to fulfil when completing CPD. According to Beddoe (2006: 100), social workers continually need to ‘retain balance between the corporate goals of employing organisations, the aspirations of education and development providers and the individual needs and aspirations of social workers’.

Beddoe’s (2006) study argues that New Zealand social workers are interested in CPD and in improving their skills but they face considerable challenges trying to balance the demands and goals of other actors with their own needs. Beddoe (2009) expands on her (2006) article as it makes similar points about the feelings of social workers towards CPD. However, it goes farther than her earlier work as it argues that New Zealand social workers want ‘learning organisations’ to be created that would support them further in their efforts to undertake post-qualifying educational initiatives. This implies that social workers desire that CPD would be delivered in a way that will help them to become more empowered in their work and that encourages critical reflection on practice. Similar research on the feelings of social workers towards CPD could enhance the literature in Ireland and inform social work practice.

As well as this, Beddoe (2006) shows that other stakeholders in the CPD process face challenges in relation to CPD, such as managers, advisors and supervisors. For example, they often have queries about rewards for staff, quality of service for service users and staff turnover. Beddoe (2006) asserts that a number of other issues have to be considered regarding CPD, such as the personal interest, motivation and capability of participants in CPD, and how these align with organisational goals and funding opportunities. Based on this, this chapter argues that the research literature would benefit greatly from similar studies being carried out in Ireland on such topics.
1.5 CONCLUSIONS AND RECOMMENDATIONS FOR FURTHER RESEARCH

This review focused on relevant international literature on CPD. Part 1.2 discussed approaches to CPD that prevail in important policy documents. Some of the most interesting points about CPD that were made here related to the conceptualisation of CPD as a cyclical and continuous process. This section also looked at some of the advantages of CPD that are advocated frequently in the literature, such as improved quality of service for end-users, enhancement of skills and knowledge of participants in the training.

Part 1.3 discussed some of the most prevalent features of CPD models in countries such as Australia, New Zealand and the United States. It also provided some detail on points of comparison and contrast between these models. Finally, part 1.4 focused on some of the issues that may be encountered when devising and implementing revised CPD arrangements.

The review also makes the following recommendations for further research to be undertaken on the following matters:

1. Attitudes of social workers and other bodies involved in CPD training here in Ireland and internationally towards CPD;
2. Challenges encountered by social workers in incorporating CPD into their routines;
3. Attitudes of social workers towards critical reflection;
4. Social and cultural factors that might affect implementation of new CPD models.
REFERENCES


