CE Provider Approval –
Keep your Chapter Provider Status in Compliance
Mary Beth Muro, CAMFT CEPA Department
Goal
Participants will know how to fill out a renewal application and what is needed when a speaker approaches them with a course.

Learning Objectives
- Identify the five responsibilities of a chapter
- Identify four ways a Course is Eligible
- Identify the five documents needed to submit with your application
General Outline and Main Topics (aka Agenda)

- Chapter’s Responsibilities
  - Notify CAMFT of any changes
  - Approving Courses
  - Annual Fees and Reports
  - Three-Year Application
  - Record Retention

- Course
  - Scope of Practice (FUN!)
  - Writing Goals and Quantifiable Learning Objectives
  - Citations

- Course Syllabus

- Instructor Qualifications

- What Needs To Be on the Certificates of Completion (FUN!)

- Evaluations

- Promotion and Advertising

- Annual Fees and Reports

- Record Retention

- CEPA Team Process

- Your Questions Answered
Chapter’s Responsibilities

We Approve the Provider (Chapter) not the Course. The Provider (Chapter) approves the Course:

1. **LET US KNOW A CHANGE OF PROGRAM ADMINISTRATOR (15 days)** – mmuro@camf.org
2. Review/Approve Potential Course Materials
3. Record Retention
4. Annual Fee and Paperwork
5. Three-Year Application
   - Previously Approved w/Recommendations
Course – Scope of Practice

Acceptable:

1. **Fundamental to the understanding or practice of marriage and family therapy; or**

2. **Significant recent developments have occurred; or**

3. **Enhance the understanding of the practice; AND**
   “Relates to the diagnosis, assessment, and treatment of the client population being served.” - it “circles back” to the client.

4. **Related to ethical, legal, statutory or regulatory policies, guidelines, and standards.**
Course – Scope of Practice

Not Acceptable:

- Course title suggests the focus is not on consumer protection, legal, ethical or clinical practice
- The course is geared solely toward the therapist’s self-care
- Course pertains solely to the therapist’s finances
- The course relates solely to the marketing of the therapist’s practice
- Course focused exclusively on how to build a practice

While such courses may be valuable to the therapist/attendee, it does not meet the regulations.
Course – Educational Goal(s)

- Educational goals are broad and should describe the type of learning that will take place and skills attendees can take back and implement into their practice.

- A good rule is to clearly state the educational goals and strive to word them in a way that aligns with the learning objectives for the course.

- **Example:**

  **Child Abuse and Maltreatment**

  Educational Goal: *Increase knowledge of child abuse and maltreatment to include specific types, risk factors for abuse, effects of child maltreatment, and protective factors for abuse.*
Course – Measurable Learning Objectives

- Learning objectives indicate *specific* learning outcomes that are derived from the educational goals, which should indicate *broad* learning outcomes.

- Measurable learning objectives are very specific things that participants will be able to do right then and there at the end of the course. When you ask participants if the learning objective was met at the end of the course, they should be able to say “Yes!”

- A good trick is to make sure your objective has a *number* in it (this kind of forces it to be measurable).

- **Example:**
  - Participants will be able to identify at least *four* types of child abuse.
  - Participants will be able to name *five* effects of child abuse.
  - Participants will be able to identify *three* strategies to aid recovery.
Course – Measurable Learning Objectives

Learning Objective Action Verbs

- **KNOWLEDGE:** recall, identify, recognize, acquire
- **COMPREHENSION:** translate, convert, transform
- **APPLICATION:** apply, carry out, solve, prepare, operate, plan, explain
- **ANALYSIS:** analyze, compare, observe, detect, classify, discover, identify, breakdown, recognize, determine
- **SYNTHESIS:** write, plan, specify, produce, organize, design, build
- **EVALUATION:** evaluate, verify, test, judge, rank, measure
- **NOT:** Understand, Articulate, Feel

*Example of an acceptable Learning Objective without a number:*

- Participants will be able to explain the difference between child abuse and child endangerment.
Citations
(back up your research/method/theory/practice)

- Citations/references must be provided to demonstrate the knowledge base(s) being utilized as the foundation of the training.
- Must have at least three (3) sources
- Must be in APA Format
  - [https://apastyle.apa.org/learn/tutorials/basics-tutorial](https://apastyle.apa.org/learn/tutorials/basics-tutorial)
Course – Syllabus
Must have: General Outline/Main Points, Goals and Objectives

Course Syllabus
Title, Date & Time

Instructor Information

General Information

Description

Educational Goals
General educational goals reference overall professional growth, improved sophistication, or greater clinical skills, which would occur later (after the workshop) in future clinical work. They can be in paragraph form or listed as bullet points.

Measurable Learning Objectives
- Objective
- Objective
- Objective

Learning objectives for the course must be in measurable terms and are things that the participants will be able to do upon completion of the course (immediate). These objectives should be specific and quantifiable. (Example: List 5 signs of... Identify 3 methods... etc.)

Outline with Main Points for each topic
1) Topic A
   (a) Main Point 1
   (b) Main Point 2...
2) Topic B
   (a) Main Point 1
   (b) Main Point 2...

Suggested Reading (optional)

*Items in red are minimum requirements and MUST be included. Additional items listed are optional and may be included along with any other pertinent information you’d like to give your attendees. Please be advised that this template is just one example of how to integrate the minimum requirements. You can format your syllabus however you like as long as it contains the 3 minimum requirements: 1.) Outline with main points for each topic, 2.) Educational goals, and 3.) Measurable learning objectives.
Instructor Qualifications
Must have two of the four:

1. Hold a **license, registration, or certificate** in an area related to the subject matter of the course. The license registration or certificate shall be current, valid, and free from restrictions due to disciplinary action by the Board of Behavioral Sciences or any other health care regulatory agency;

2. Possess a **master’s or higher degree** from an educational institution in an area related to the subject matter of the course;

3. Have **training, certification**, or experience in teaching subject-matter related to the subject matter of the course; or

4. Possess at least **two years of experience** in an area related to the subject matter of the course.
Confirmation of Attendance

The Scholarly 7

1. Name of the licensee and license number or other identification number;

2. Course title;

3. Provider name and mailing address;

4. Board-recognized approval agency name (CAMFT);

5. Date of the course;

6. Number of hours of continuing education credit; and

7. Signature of the course instructor, provider, or provider designee
Confirmation of Attendance (Sample)

Confirmation of Attendance
(Do not destroy-retain as verification of continuing education)

Name: ___________________________  License Number: ___________________________

Course title: ___________________________

CE hours/credits: ___________________________  Date: ___________________________

Signature: ___________________________
(insert name of instructor, provider, or provider designee)

CAMFT-approved continuing education provider #____

CE Provider Name
Street Address, City, State, Zip Code
website | phone number
Evaluations

Question #2:

Explain the administrative review process you use with the evaluation results to improve or to plan for future professional development activities.

Evaluation Form (The Nosey 9)

Goals and Learning Objectives, Course Content, Instructor, Facilities)

1. Whether the learning goals and objectives were met;
2. Course appropriateness to participants’ education, experience, and licensure level;
3. Effectiveness of the presentation, including use of experiential or active learning;
4. Relevance to the practice;
5. Currency and accuracy of the information;
6. Instructor’s knowledge of the subject matter and clarity of delivery;
7. Instructor’s responsiveness to participants;
8. Suitability and/or usefulness of instructional materials; and
9. Location, facilities, technology, administration of the program.
# Course Evaluation

In order to help us evaluate this course and improve future courses, we ask you to take a few minutes of your time to fill out the following form. Your answers will enable us to better judge the effectiveness of the presentation and materials. Please select the scale choice that best represents your opinion and answer the questions about the [type of CE activity] below.

**Course Title:**

**Date(s):**

**Presenter(s):**

## Educational Goals and Learning Objectives:

<table>
<thead>
<tr>
<th>Based on the content of the course, I am able to:</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational goal #1 (Write out specific goal)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Educational goal #2 etc. (Write out specific goal)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Objective #1 (Write out specific objective)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Objective #2 etc. (Write out specific objective)</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

## Course Content/Learning Experience:

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content was appropriate for [insert experience type] level training.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Instruction at a level appropriate to [insert participant’s education] level training.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Content was appropriate for [insert: licensure level] training.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Information could be applied to my practice.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Teaching methods were effective</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Instructional materials were useful.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Information was current and accurate.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
</tbody>
</table>

### Instructor: [Name]

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knew the subject matter.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Answered questions effectively.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Was responsive to questions, comments, and opinions.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Utilized course-appropriate technology to support learning.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
</tbody>
</table>

## Location, Facility, Technology, Program/Administration:

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility was adequate for my needs.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Special needs were met.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Facility was comfortable and accessible.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Food and beverage were adequate (if applicable)</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
<tr>
<td>Program’s promotional material was informative and accurate.</td>
<td>○</td>
<td>○</td>
<td>Neutral</td>
<td>Disagree</td>
<td>○</td>
</tr>
</tbody>
</table>
Promotion and Advertising

The Fabulous 14

1. The provider’s name and approval number;
2. The course title;
3. A clear, concise description of the course content and educational objectives;
4. A description of the target audience;
5. The course schedule;
6. A clear indication of any activities within the course or program that are not offered for continuing education credit (i.e., meals and other breaks);
7. The instructor’s name and credentials, including relevant professional degree and discipline, current professional position, and expertise in program content;
8. A statement of when and how course completion certificates will be awarded;
9. The cost of the course, including all fees;
10. The refund/cancellation policy in cases of non-attendance by the registrant;
11. Instructions for requesting accommodations for disability;
12. Instructions for addressing grievances: AND
13. The statement “Course meets the qualifications for hours of continuing education credit for LMFTs, LCSWs, LPCCs, and/or LEPs as required by the California Board of Behavioral Sciences.”
14. The statement “[insert organization/provider name] is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for [insert the title(s) of the target audience]. [insert organization/provider name] maintains responsibility for this program/course and its content”
TITLE
Date & Time
Where
*Info on Breaks: Example: 1 hour lunch break and two 15
minute breaks will not be counted toward CE time
awarded.

Course Description & Educational Goals
Learning Objectives
1.
2.
3.
etc

INSTRUCTOR INFO (INCLUDE NAME AND
CREDENTIALS, RELEVANT DEGREE AND
DISCIPLINE, CURRENT PROFESSIONAL
POSITION AND EXPERTISE IN PROGRAM
CONTENT

[INSERT ORGANIZATION, PROVIDER NAME] (PROVIDER
Name) IS APPROVED BY THE CALIFORNIA ASSOCIATION
OF MARRIAGE AND FAMILY THERAPISTS TO SPONSOR
CONTINUING EDUCATION FOR LMFT’S, LCSW’S, LPC’S
AND LEP’S. [INSERT ORGANIZATION, PROVIDER NAME] MAINTAINS RESPONSIBILITY FOR THE PROGRAM AND
ALL ITS CONTENT.

Target Audience
(example: This course is
designed for mental health
professionals...)

Cost

Refund/Cancellation Policy

Accommodations
To request accommodations for
special needs, please email the Program
Administrator at...

Grievances
To obtain the grievance
policy or report a
grievance please email
_________ or call —

Certificates
Course Completion
certificates will be
awarded at the end of the
course in exchange for a
completed evaluation
form.

Course meets the
qualifications for ___ hours
of continuing education
credit for LMFT’s, LCSW’s,
LPC’s and LEP’s as
required by the California
Board of Behavioral
Sciences.
Promotional Material Tips:

- Email = Promotional Material (any form of announcement of your program)

- What if all the requirements do not fit onto your promotional flyer or postcard?

It is not always feasible to include all items in promotional materials. In cases where one or more of the required elements is not included in promotional pieces, you can direct people to where it can be found (e.g. Website, phone number, etc.)

Be specific, “full course schedule can be found at www.------.com” or “grievance policy and instructions for requesting special accommodations can be obtained by emailing ----@------.com”
Annual Fee and Report

Fee - $200

Annual Reports
- Grievances;
- All Activity Summary (Date, Title and Brief Summary from all activity).

(Process Paperwork & Fee Together)
FOR EVERY COURSE: Must Keep for Four (4) Years:

- Syllabi for all courses;
- The time and location of all courses;
- Course advertisements;
- Course instructors’ vitae or resumes;
- Attendance rosters with the names and license numbers of licensees who attended the courses;
- Sign-in sheets; and
- Confirmation of Attendance issued to licensees who attended the courses.
CEPA Resources

https://www.camft.org/CE-Provider/CE-Provider-Resources

CE Provider Resources

The following information is provided for guidance in adhering to the CEPA Guidelines for Provider Approval.

- CEPA Program Manual
- How to Write an Educational Goal and Measurable Learning Objective
- Sample Record of Course Completion
- Sample Course Evaluation
- Tips for Drafting Co-Sponsorship Agreements
- BBS Continuing Education Regulations
- California Business and Professions Code
- Instructor-Course Content Worksheet
- Sample Promotional Material
- Sample Course Syllabus
- Citations and References
- Application Pitfalls - Suggestions from a CEPA Committee Member
APPENDIX

Three-Year Renewal Document Examples

- How to answer each question
- Example of APA Formatted Citations
- Example of Course Syllabus
- Example of Instructor Vitae or Resume
- Example of Course Evaluation
- Example of Record of Course Completion
- Example of Promotional Material
YOUR QUESTIONS ANSWERED

More questions about these topics?

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www.camft.com/CEProvider