MSBOESWMFT MS CE Provider Audit Form

Provider Name:	MSBOESWMFT S	W CE Provider #
Date of Audit:	Method of Audit:	
Audit completed by:	MSBOESWMFT S	W CE Committee Member
	MSBOESWMFT S □	W CE Staff
	Other	
Course Title:		
# CE Credits:		
Course begin time:	Course end time:	
Course Delivery Format:		
Course Date(s):		
REVIEWER: Please indicate if you are able to locate the	following information	on and/or materials. Add
comments where you think it is applicable.		Managara and any an
Course Promotional Materials and Advertising Practic		MSBOESWMFT SW CE Reviewer Comments
Course or session promotional materials, including we applicable	bsite (flyer, etc.) if	
2. Promotion and advertising of the activity conducted in responsible manner?	an ethical and	
3. Email and telephone contact numbers readily visible?		
4. Accommodations for disability (ADA in US) statemen	t clearly visible?	
5. Target audience clearly identified?		
6. Program goals and learning objectives specific, behavi and clearly identified?	oral, observable	
7. Course content pertinent to social work theory, method practice?	ls, research and/or	
8. Presenter/Author's name, credentials and experience c	learly stated?	
9. Fees and refund policy clearly stated?	<u> </u>	
10. Schedule/agenda/timeline of activity clearly outlined?		
11. Schedule adhered to?		
12. Course interactive features accurately indicated? (role practice)	nlary discoussion	
13. Specific topic designation (clinical, social work ethics)	piay, discussion,	
identified ahead of time?	accurately	
	accurately	

15. Full description of participant requirements for successful completion of	
the activity?	
16. Provider number and contact number of approving organizations clearly visible on brochure or web?	
17. Complaint/Feedback contact information clearly stated?	
Course Evaluation	MSBOESWMFT SW CE Reviewer Comments
Evaluation addresses effectiveness of presentation?	
2. Evaluation includes program content?	
3. Evaluation lists and rates course learning objectives individually?	
4. Evaluation includes relevance to practice?	
5. Evaluation includes course appropriateness to participant's education, experience, and/or licensure level?	
6. Evaluation includes suitability of instructional materials to support participant learning?	
7. Evaluation includes course effectiveness, presentation and clarity of subject matter?	
8. Evaluation includes user-friendliness of course technology?	
9. Complaint/Feedback contact information clearly stated?	
Attendance/Certificate	MSBOESWMFT SW CE Reviewer Comments
1. Attendance login (sign-in)?	
2. Process for awarding certificate of attendance clearly stated?	
3. When/how were certificates distributed?	
4. Does the certificate indicate the following:	
 Name of the organization offering the event 	
 Name of the organization offering the event Social worker license/certification/registration number and licens 	
jurisdiction (if applicable)	
• Course title	
• Course location	
• Course date(s)	
• Total number of learning hours	
Amount of credit awarded (# CE credits, CEUs) Designation of credit tonic hours (clinical hours culture)	.1
 Designation of special topic hours (clinical hours, cultural competence, social work ethics hours) if applicable 	u
 Organization(s) supporting the course 	
 Signature of designated authority for the CE provider 	
 MSBOESWMFT SW CE approval statement 	
5. Did participants sign-in and sign-out when entering and/or leaving the	
workshop?	
Course Content	MSBOESWMFT SW CE Reviewer Comments
Course outline	
2. Course learning objectives	
3. Bibliography or references	
4. Course materials (books, articles, slides, handouts)	

5. Social work core content	
a. Theories and concepts of human behavior in the social environment	
b. Social work practice, knowledge and skills	
Social work research, programs or practice evaluations	
Social work agency management or administration	
Development, evaluation and/or implementation of social policy	
Social work generalist practice	
Social work clinical practice	
Diversity and social justice	
c. Social work ethics	
d. Other/please specify:	
6. Social work practice areas	
a. Knowledge base	
b. Engagement/relationship building	
c. Assessment	
d. Planning	
e. Intervention/treatment	
f. Evaluation	
g. Termination of treatment	
7. Methods apply to	
a. Individuals	
b. Groups	
c. Organizationsd. Communities	
e. Social Systems	
8. Current issues in social work practice	
9. Course content applies to clinical social work	
10. Course content is non-clinical	
11. Course content applies to generalist social work	
12. Course content applies to other: Explain	
13. Course targets skill levels	
a. Beginning	
b. Intermediate	
c. Advanced	
14. Content and presentation were consistent with social work ethics	
Other	MSBOESWMFT SW CE Reviewer Comments
1. Registration, payment, customer service	
2. Venue, facilities	
3. Contact person's ability, helpfulness, availability?	
4. Were materials current, appropriate, professional and readily available?	
5. Was the activity conducted in a manner consistent with social work ethics?	
Program Strengths	

D	
Program Weaknesses	
Recommended Follow-up	
Recommended Follow-up	
-	