


2018

A Case Study on Learning Transfer in a Social Service Organization

Cynthia A. Barnes
Walden University

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>

 Part of the [Business Administration, Management, and Operations Commons](#), [Management Sciences and Quantitative Methods Commons](#), and the [Social Work Commons](#)

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

Walden University

College of Management and Technology

This is to certify that the doctoral dissertation by

Cynthia Barnes

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Joseph Barbeau, Committee Chairperson,
Applied Management and Decision Sciences Faculty

Dr. Marcia Steinhauer, Committee Member,
Applied Management and Decision Sciences Faculty

Dr. James Bowman, University Reviewer
Applied Management and Decision Sciences Faculty

Chief Academic Officer
Eric Riedel, Ph.D.

Walden University
2018

Abstract

A Case Study on Learning Transfer in a Social Service Organization

by

Cynthia A. Barnes

MA, Bowie State University, 2003

BS, University of Maryland University College, 1991

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Management

Walden University

February 2018

Abstract

Support from managers, training specialists, and human resource development specialists is needed if social service employees are to transfer learning to their organizations. There is a gap in the literature about managers, training specialists, and HRD specialists familiarizing employees with learning transfer expectations. This study addressed the way social service employees transferred what was learned after attending normal training classes. The research questions focused on learning transfer expectations for the employees, conditions that addressed during the learning transfer, processes that are in place where there was not a learning transfer initiative, and the way learning was used by employee. The study utilized a case study approach and thematic analysis based on theoretical frameworks of McGregor's theory X and theory Y, Drucker's management by objectives theory, Kirkpatrick and Kirkpatrick's 4 levels of training evaluation. Data were collected from open-ended interviews with 15 human resources officials in 1 agency. Data were inductively coded and analyzed for themes and patterns. Findings yielded themes of inconsistencies such as familiarizing employees with learning transfer expectations, differences of factors or conditions that addressed the learning transfer function or activity, not having a learning transfer initiative or instructions, and having an informal way of using what employees acquire from training limited policies and procedures, and a lack of direction. These changes could promote awareness of the social service community to encourage regular updates on training, practice new learning, partner and collaborate with stakeholders, review training offerings, and use technology.

A Case Study on Learning Transfer in a Social Service Organization

by

Cynthia A. Barnes

MA, Bowie State University, 2003

BS, University of Maryland University College, 1991

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Management

Walden University

February 2018

Dedication

To my family and friends with love.

Acknowledgment

A special thank you to everyone who walked with me on this educational and life-changing journey.

Table of Contents

List of Tables	v
List of Figures.....	vi
Chapter 1: Introduction to the Study.....	1
Background of the Study	3
Problem Statement.....	6
Purpose of the Study	8
Research Questions.....	9
Theoretical Foundation	10
Conceptual Framework	12
Nature of the Study	14
Definitions.....	15
Assumptions.....	17
Scope and Delimitations	18
Limitations	19
Significance of the Study.....	20
Significance to Practice.....	23
Significance to Theory	24
Significance to Social Change	25
Summary and Transition.....	26

Chapter 2: Literature Review	28
Literature Search Strategy.....	28
Theoretical Foundation	29
Conceptual Framework.....	35
Literature Review.....	37
Prior Research.....	40
Current Research.....	47
Summary and Conclusion	53
Chapter 3: Research Method.....	55
Research Design and Rationale	55
Role of the Researcher	58
Methodology	60
Participant Selection Logic.....	60
Instrumentation	62
Pilot Study.....	63
Procedures for Recruitment, Participation, and Data Collection	65
Data Analysis Plan.....	67
Issues of Trustworthiness.....	69
Summary	72
Chapter 4: Results.....	73

Pilot Study.....	73
Research Setting.....	75
Demographics	76
Data Collection	77
Data Analysis.....	79
Data Managing.....	79
Categorization of Data	80
Evidence of Trustworthiness.....	84
Study Results	85
Responses to Research Questions.....	89
Comparison by Title	96
Subgroup Comparison	99
Summary	102
Chapter 5: Discussion, Conclusion, and Recommendations	103
Interpretation of Findings	107
Limitations of the Study.....	118
Recommendations.....	121
Social Change Implications	124
Conclusions.....	128
References.....	130

Appendix A: Institutional Review Board Approval Letter	153
Appendix B: Introductory Letter to Potential Site Official	154
Appendix C: Letter of Permission to Conduct Study	155
Appendix D: Title Designation and Transcript for Accuracy.....	156
Appendix E: Consent Form	157
Appendix F: Interview Schedule	159
Appendix G: Consent Form (Pilot).....	161
Appendix H: Research Questions and Interview Questions	163
Appendix I: Concepts	165
Appendix J: Themes	172
Appendix K: Instrument	173
Appendix L: Request Collection.....	174

List of Table

Table 1 Summary of Revised Interview Questions101

List of Figures

Figure 1. Learning transfer in a social service organization. 13

Chapter 1: Introduction to the Study

Social service employees will not transfer what they learn in training until managers, training specialists, and human resource development specialists provide support. Their field is a helping profession designed to assist people with social problems. The employee is at the forefront of social problems. Social service organizations ensure that all Americans have an opportunity to live a life of prosperity and abundance (Glicken, 2011). They help when families do not have jobs or the ability to earn a living, when they lose home and health care, or when they experience “mental illness or physical disabilities” (p. 4).

Social service employees must think critically and maintain an openness to continuously learn (Wilson, 2013). Competence and being knowledgeable are necessary. When employees are competent, clients are satisfied and benefit from the knowledge (Wilson, 2013). If, however, employees lack knowledge, they suffer. Employees need an immense wealth of knowledge covering education, medicine, politics, psychology, and economics for policies and assessments (Lohmann & Lohmann, 2002).

Social service employees have an ethical responsibility to increase professional knowledge and practice (Glicken, 2011). They challenge injustice, promote social responsibilities and self-determination, enhance opportunities, and network with other professionals for resources. Their approach is strengths-based practice, evidence-based practice, psychodynamic, cognitive-behavioral therapy, or solution focused therapy (Glicken, 2011).

The field supports social change and a balanced life. Employees work with “individuals, families, groups, organizations, and communities” (Cournoyer, 2013, p. 3).

The work is complex, challenging, and frustrating. Services include child protection for risk of neglect and mistreatment. They assist parents with knowledge of how to care for children, provide intervention for families in crises, and hold counseling sessions for individuals abused or incarcerated (Cournoyer, 2013).

There are several types of social service organizations. Government and nongovernment organizations administer social services with lines of responsibility often crossed between government and nongovernment organizations (Frumkin, 2002). Size and longevity differ. Size is dependent on responsibility and funding and the ability to form partnerships. Regardless of size, there is confusion about boundaries (Graddy & Chen, 2006). Large organizations have resources and the capacity to deliver needed services. Smaller organizations need partnerships for contractual obligations. The longevity of the organization is dependent on its ability to provide services, sustain challenges, and maintain financial and human resources. Causes for organizational dissolution include financial shortages, crises, or obstacles (Simon & Donovan, 2001).

When examining for-profit, non-profit, and community-based organizations, I found that for-profit corporations make money and that their decision-makers are owners or directors. The facility includes day care centers, hospitals, mental health and substance abuse offices, and nursing homes that do not have accountability in the community but must follow regulations. The services are for individuals who can pay or use insurance. In some instances, the government shoulders the cost for individuals unable to pay (Hardina, Middleton, Montana, & Simpson, 2007). Hardina et al. (2007) stated, "Medicaid and Medicare are two Federal programs that are used to reimburse private physicians, hospitals, and nursing homes for individual services" (p. 76).

The nonprofit organizations serve the interest of the public. They deliver a broad array of services from training to health care. Individuals make donations and in turn, receive deductions for federal taxes. They operate by collecting fees and receiving charitable contributions with or without government funding. It hires millions and represents a substantial share of the gross domestic product (Frumkin, 2002). The revenue collected provides funding that benefit the public (Hardina et al., 2007). They are voluntary organizations, nongovernmental organizations (NGOs), and community-based organizations (CBOs).

Community-based organizations function at the local level to improve life for residents. They are considered trustworthy more so than government agencies, which must verify what it does to foster public good (Hardina et al., 2007). Their flexibility creates innovative services. This case study is on learning transfer in a social service organization. The organization is a local, county government organization with responsibilities for providing services of intervention, strengthening families, protecting its vulnerable citizens, encouraging self-sufficiency, and promoting personal responsibility.

Background of the Study

President Franklin D. Roosevelt signed the Social Security Act, which became law as an old-age insurance system and an unemployment insurance system administered by states (Burg, 2005). The act gave retired individuals, based on earnings and taxes paid, an annuity at age 65. Social programs of the federal government work with disadvantaged individuals. Social programs also include long-term care, care for mental illness, and substance abuse assistance. It is troublesome now that the government has

“reduced its commitment to social programs” (Karger & Stoesz, 2018, p. 3). Karger and Stoesz (2018) commented that in the past “Jane Addams, Whitney Young Jr., and Wilbur Cohen” (p. 3) among others were pioneers of social inadequacies and mentioned that one-day others will have to play a part to advance social challenges.

Many U.S. Congresses amended the Social Security Act since 1935. The 1981 Omnibus Budget Reconciliation Act amended Title XX, establishing block grant programs for states to eliminate dependency, maintain self-sufficiency, and prevent exploitation of children and adults. Title XX, Block grants to states for social services and elder justice, Section 2002, (2) (B), states “expenditures for such services” (p. 512) include “(ii) personnel training and retraining directly related to the provision of those services “including both short-and-long-term training” (p. 512) and “(iii) conferences or workshops, and training or retraining” for “individuals with social services expertise” (p. 512).

Problems in the social service field started with its inception. The field, established as a hybrid, bridges the gap between public criticism and government responsibility. It operates in the public and private sectors, addressing law, medicine, administration, family, school, and emergency response (Parton, 2000). Following events of the September 11th terrorist attack on the United States, social service employees began addressing occurrences of disasters (Sweifach, Linzer, & LaPorte, 2012). Their policies affect clients, employees, and theories that are used as guidance for social work. Social service handles individual and state matters, but the field is so broad and complex it takes on all needs, especially those of the family (Parton, 2000). The practice, driven by social policies, determines how to do the work. Once employed,

employees must have knowledge that allows them to analyze and refine instructions, policies, and procedures (Sweifach et al., 2012).

To further complicate the social service employee's job, Ayon (2013) mentioned that the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193) makes known that "undocumented immigrants are ineligible for any public services" (p. 14) by the federal or local government. In Arizona, it is problematic because children of immigrants are often U.S. citizens. There is a small number of culturally informed professionals and interpreters. This lack of professionally qualified social service employees affects the system because their charge is to "advocate and work with people who are poor, vulnerable, and oppressed" (p. 15).

In the school system, educators of social work are dependent on an evidence-based approach to translate and disseminate information to clinicians and other professionals (Prescott, 2013). National and state surveys report that social service schools often focus on the student (Dupper, Rocha, Jackson, & Lodato, 2014). The focus has not changed. Dupper, Rocha, Jackson, and Lodato (2014) stated, there is a "misunderstanding, underappreciation, and underutilization of school social workers" (p.71). They added there is no value in their contributions and the literature is limited when it comes to examining why the focus has been on the individual.

Debates in the field include the growing population and the number of people needed to take care of and pay for funerals (Thompson & Yeung, 2015). In some situations, no one is available or willing to take on the responsibility. Thompson and Yeung (2015) asserted that communities need to take on funeral responsibilities and social workers should initiate conversations and advocate for funds to pay funeral

expenses to prevent destitution or poverty. Also, regulations and amendments of the Association of Social Workers “are not compatible with the increasing social and technological changes in the last two decades” (Kagan, 2015, p. 2). Employees who offer care services must become technologically literate (Dodsworth et al., 2013).

Learning takes place through audio and video, which saves money on maintenance and administrative fees (Gray & Schubert, 2013). Gray and Schubert (2013) mentioned that with the Institute for Research and Innovation in Social Services (IRISS), stakeholders use “audio sharing services such as Audioboo and Soundcloud” (p. 558). Seminars and conference presentations are recorded and disseminated to “stimulate all stakeholders” in development (p. 558). Their use of video streaming cuts down the distribution of videos. This approach offers lower rates and other ways to format. Officials of IRISS collaborated with the Scottish Mental Health Arts and Film Festival “to create MindReel” (p. 558) films to educate the community on the stigma of mental health.

Problem Statement

Learning is a way to keep the social service employee knowledgeable and skillful to assist clients (Kyndt, Govaerts, Verbeek, & Dochy, 2014). Kyndt, Govaerts, Verbeek, and Dochy (2014) indicated they need “continuous learning” (p. 2391). Information changes quickly and employees are expected to “learn strategies” (p. 2392) to work adequately and efficiently. According to Futris, Schramm, Lee, Thurston, and Barton (2014) and Pope, Loeffler, and Ferrell (2014), instructions should link to job needs that prepare employees for realities. Work should incorporate goals complementary of the organization (Gibson, 2014).

Employees need continuous training (Wesley, Tunney, & Duncan, 2004).

Yearly in the United States, \$58 billion goes toward approximately 25 hours of formal training. Although much of the money is spent on executive and management training, the greatest amount goes to the “rank-and-file employees and supervisors” and “four times that amount is spent on informal instructions” (p. 306). Phillips and Phillips (2016) stated, “An estimated \$164 billion” goes toward “training and development” (p. 1). It is unclear if social service employees had “the necessary training” to do the job (p. 3). Kagan (2015) asserted that social service employees act unprofessional. Their job is “perceived as one of the less prestigious helping professions” (p. 4). They are considered as people who do good but not “professionals with specific skills and knowledge” (Harington & Beddoe, 2014, p. 149).

In organizations, leaders should plan training, using guidelines that are routinely updated with input from stakeholders and they should use technology (Hoffmann & Freeman, 2014; Lee et al., 2015). A performance managed process is needed to assist with outcomes (Carnochan, Samples, Myers, & Austin, 2014). Employees with responsibilities for others need to use technology, exhibit cultural awareness, and collaborate (Bernhardt, 2015).

There is a gap in the literature about managers, training specialists, and HRD specialists familiarizing employees with learning transfer expectations. This study is presented to steer positive social change. It provides the current state of affairs of the way social service employees transfer what they learn in training to the organization. It makes known that employees must continually attend training that is current and in line with the times and problems to offer useable knowledge and service.

It brings light to several very important points. First, managers, training specialists, and HRD specialists need to approve and align training that is in line with the mission and goals of the organizations. Second, employees need to be taught ways to integrate learning obtained from training. Third, managers, training specialists, and HRD specialists should review and have a process in place to consider the usefulness of what employees obtain from training. Fourth, employees must work with colleagues, stakeholders, and people in the community. Finally, managers, training specialists, and HRD specialists should establish times throughout the year to meet with stakeholders to collaborate on training based on societal needs.

Purpose of the Study

The study reveals how employees of a social service organization transferred what was learned after attending training. It provides employee familiarity of learning transfer, the function or activity, integration, and use. I designed the study to explore the approval of training, interactions, guidance, and collaboration. The instruments used to obtain data consisted of interviews, notes, and observations.

Social service employees pay attention to problems of the living. They help people obtain resources and even protection (Hardcastle, 2011; Summers, 2010). They improve the lives of others by addressing challenges of daily life (U.S. Department of Labor, 2010). Training is what social service employers use to increase employee knowledge (Handshaw, 2014). Employees come to organizations with some skills, but need broad training before they can make a difference.

Employees have “feelings of inadequacy and helplessness at being forced” (p. 225) into a position of rescuer for children with anxiety issues (Bailey, 2015). They offer

spiritual care when working with terminally ill individuals, but have limited tools and struggle about their role. Hospice social workers need additional training (Wesley et al., 2004). Employees indicated their need to become culturally skilled when working with people of diverse religions and practices of spiritual matters. Peteet and Balboni (2013) surmised that information is needed on how to help employees handle the role of spirituality, boundaries, and competencies. Their suggestion was to incorporate collaboration. Balboni, Vanderwerker, Block, Paulk, Lathan, Peteet, and Prigerson (2007) mentioned that when conducting research on patients with advanced cancer about religion and spirituality support, they found the people did not have strength to attend religious service. However, when support was given, they saw improvements. They asserted there was a barrier to spiritual care because of “inadequate training in evaluating spiritual needs” (p. 559).

Research Questions

The central research questions were:

1. How do managers, training specialists, and HRD specialists familiarize employees with learning transfer expectations?
 - 1a. What factors or conditions address the learning transfer function or activity?
 - 1b. In the event there is not a learning transfer initiative or instruction, how do employees integrate what was acquired in training to the organization?
2. How do managers, training specialists, and human resource development specialists use learning acquired from employees who attend training?

Theoretical Foundation

As illustrated in Figure 1, McGregor's Theory X and Theory Y are about assumptions. With Theory X, people dislike work, they must be threatened to achieve organization goals, they do not want work responsibilities and they want someone to tell them what to do. With Theory X, the assumption is also that people want the security that comes as a result of work but not the work itself. McGregor's Theory X and Theory Y are about the motivation of people and management. Using Theory Y, the assumption is that work is natural, people are committed to the goals of the organization, reward will follow work achievements, people learn to accept work responsibilities (McGregor, 1960). McGregor (1960) stated, that "Every managerial act rests on" a theory (p. 8).

Drucker's Theory on Management by Objectives is a top-down management approach to improve performance. It includes a five-step process of establishing objectives that are then shared with the employee to accomplish. The accomplishment is then monitored and evaluated. If the employee's performance is acceptable in completing the objectives, the employee is rewarded. Drucker (2001) states that Management by Objectives "is a prerequisite for functioning communication" where the manager engages in a conversation with the employee to find out if the two are on the same page about work responsibilities (p. 266). Drucker indicated that initially the understanding is different but the two continue to talk until they focus "on something that is real" to both (p. 267). Drucker's Theory speaks to instructions. He stated, "efforts must all pull in the same direction" (Drucker, 1954, p. 121). In other words, the manager must point the employee to the organization's mission. Drucker's theory makes known that the manager is to approve training and offer instructions.

Kirkpatrick and Kirkpatrick Four Levels of Training Evaluation (2006) explained that the evaluation of training (e.g., reaction, learning, behavior, and results) should connect performance to the accomplishments of organizational results. According to Kirkpatrick and Kirkpatrick (2016), the primary reasons to evaluate training is to make improvements, maximize learning that will create positive results for the organization, and will demonstrate worthiness. The New World Kirkpatrick Model reverses the theory where Level 4 is placed as Level 1; Level 3 is placed as Level 2, Level 2 is placed as Level 3, and Level 1 is placed as Level 4. They indicated that the order was changed to incorporate things that were overlooked, misused, misinterpreted, and to reveal how the theory is applied in recent times. For example, the former model, Levels 1 and 2 were highly emphasized and Levels 3 and 4 were considered too expensive or difficult. They commented that training professionals misapplied the theory and used it for one-on-one or small groups instead of globally and to large organizations or an entire organization or company. Kirkpatrick and Kirkpatrick's Theory demonstrates that training results in a behavior change.

The core belief of HRD is that organizations are established by the expertise of man to achieve goals (Swanson & Holton, 2009). With that, HRD "is intricately connected to the fate of any organization" (Swanson & Holton, 2009, p. 10). The expertise of man is "maximized through HRD processes" where it analyzes, proposes, creates, implements, and assesses (p. 10). Human resource development has two major responsibilities: training and development and organization development. Werner and DeSimone (2009) mentioned that training is a way of availing knowledge and skills to employees to perform. The development part plays a role with preparing employees for

long term where attention is on the future. Organization development is a process of enhancement through “planned interventions that apply behavioral science concepts” (p. 11).

Conceptual Framework

The conceptual framework provided assumes a relationship exists between the theories of McGregor, Drucker, Kirkpatrick and Kirkpatrick, and the HRD function. At each level of the framework, support is provided helping the employee meet goals and objectives of the organization. The study did not address work performance of the employee, instead it explored learning transfer familiarity. As illustrated in Figure 1, there are five levels of the conceptual framework. Level 1 (beginning from the inside and extending outward) places the employee at the center of all levels. Level 2 is where the manager gives direction to the employee to meet the needs of the organization (and society). Level 3 is the position of Kirkpatrick and Kirkpatrick’s Theory where the training specialist and the HRD specialist provide training, work with employees on training, clarify new information, and assist with training application. Level 4 is where the social service organization creates policies and procedures to improve the quality of life for individuals in society. Level 5 is where society debates and discusses the needs of people. The openings at each level allow engagement for fast track needs, political pressures, emergencies, emerging issues, and threats.

The three arrows represent a relationship. For example, Arrow A points from society to the social service organization. Arrow B points from the social service organization to the employee with an understanding of Kirkpatrick and Kirkpatrick’s theory and assistance from the training specialist and the HRD specialist about training,

training needs, training opportunities, and training expectations. It continues through to the manager with clarification of policies and procedures. Arrow C points from the employee, crossing the manager, Kirkpatrick and Kirkpatrick's theory (training specialist, HRD specialist, and the organization) to society revealing an understanding of work responsibilities.

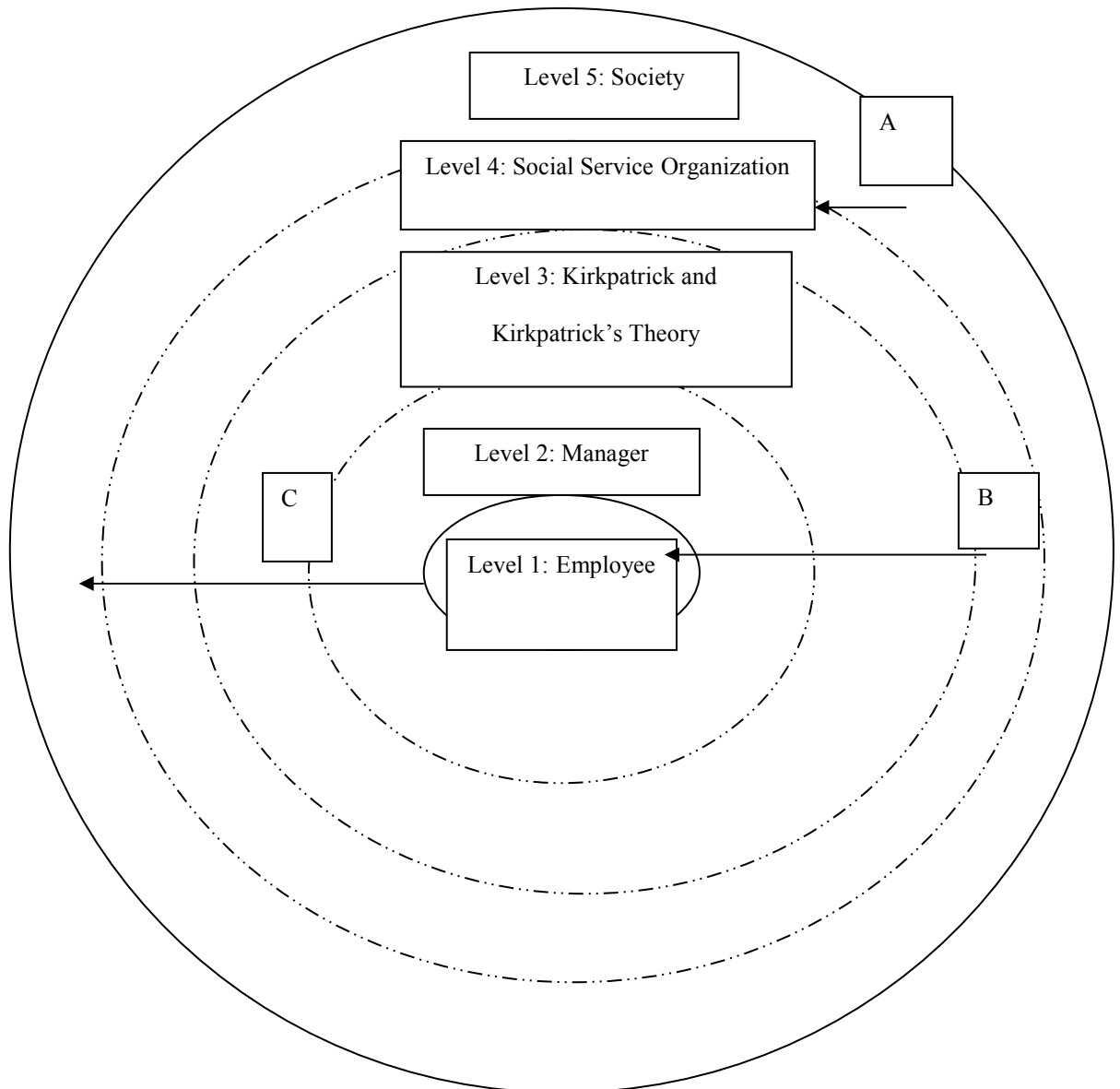


Figure 1. Learning transfer in a social service organization.

Nature of the Study

Yin (2010) stated, “Virtually every real-world happening can become the subject of a qualitative study” (p. 3). A distinction is to start with one or multiple realities, uniqueness or “potential generalizability of human events, and the need to follow a particular methodological variation” (p. 3). Regardless of the distinction, it is imperative to demonstrate “trustworthiness and credibility” (p. 3). Qualitative research has specific features: studying the meaning of individuals in a real-world situation, representing their “views and perspectives,” and providing insight or “emerging concepts” to explain behavior using “multiple sources of evidence” (p. 8).

This research study represents people in a real-world setting. It presents their “views and perspectives” and “insight of hard to obtain information” (Yin, 2010, p. 3). It covers the “social, institutional, and environmental conditions” of the participants’ life (p. 8). A growing number of scholars have discussed the need for more research on learning transfer because of the need to identify an agenda, advocate for stakeholders, plan organizational goals and strategies, and to work collaboratively (Baek & Kim, 2014; Margaryan, Littlejohn, & Milligan, 2013; Parrish, Harris, & Pritzker, 2013).

Walden University officials provided approval to conduct this study (Appendix A). The introductory letter to the potential site official explained my intentions to carry out the study, the study’s purpose, approach, and criteria for participation (Appendix B). The letter identified who would conduct the study, background of the study, its nature, risks and benefits, compensation, confidentiality, and contact for questions. On August 5, 2013, the Director of Prince George’s County Department of Social Services (Appendix C) allowed two weeks to conduct research.

Participants with a similar background in social service responsibilities participated. They were managers, training specialists, and HRD specialists (Fellows & Liu, 2015). They worked in a social service organization for a minimum of 5 years and had expert working knowledge of the importance social service organizations play in society. They were knowledgeable of training offered to employees, held an advisor's role in training, or facilitated training for the organization, as indicated in a signed informed consent.

Multiple voices were reported through quotes and themes of the participants (Yin, 2011). It was through the collection of data that a detailed description of the case and themes emerged. Other sources that helped to explain the data included documents, notes, and observations. Data were validated and coded data to determine meaning. Main points and summaries explain the data. I used Microsoft Excel to analyze the data, as discussed in Chapter 3. A complete perspective of the incidents and a within-case analysis is given of each case followed by a thematic analysis (cross-case).

Definitions

The following definitions add clarity.

Continuous Change: The endless modifications of practices and processes (Swanson & Holton, 2009).

Evidence-based practice: A research way to practice using a scientific methodology to obtain a conclusion (Glick, 2011).

Human resource development: Organized and planned activities by the employer to obtain skills to meet present and future needs (Werner & DeSimone, 2009).

Incidental learning: An act that happens randomly and takes place with other activities (Marsick & Watkins, 2015).

Indigent: An individual with limited financial resources to pay for interment (Thompson & Yeung, 2015).

Learning organization: An organization that continuously teach its employees' skills of competency (Werner & DeSimone, 2009).

Manager: A person of authority with charge over others (Drucker, 1954).

Motivation: An intangible form of energy used to reach a desired outcome (Reeve, 2009).

Participant Perception: First-hand experience of events, interactions, situations, and goods (Swanson & Holton, 2009).

Partnership: A relationship with an individual or individuals with explicit terms and conditions (Beddoe, 2014).

Reliability: A method of consistent, unbiased, and trusted measurement (Werner & DeSimone, 2009).

Self-care: Care of self without the assistance of a professional, medical person (Sweifach et al., 2012).

Social services: Efforts of a qualified individual or organization that carries out social initiatives (Petch, Lightowler, Pattoni, & Watson, 2014).

Training: Knowledge passed on to employees by the employer (Handshaw, 2014).

Training transfer: An application of applied learning (Handshaw, 2014).

Transfer of training: Applying new knowledge to an organization (Werner & DeSimone, 2009)

Validity: A data collection method that measures intended target (Werner & DeSimone, 2009).

Assumptions

I assumed that once social service employees started a job in a social service organization, they were prepared to provide knowledge and service to people in need. Another assumption was that the employees routinely used technology since in many organizations it is a necessary tool and because without it, there is limited access to information, people, social networking, and factual data. Another reason I assumed technology was used routinely is because the 21st-Century is the information and knowledge age and people use cell phones daily to record messages, send e-mails, take notes, and pictures. Laptops are less expensive than when first entering the marketplace and now discussions center on self-driven cars. These were assumptions for several reasons. Undergraduate and graduate programs in the social service field prepare students for the world of work. The programs offer real-life application or internships where students learn about the field, its history, and recent trends. Students read books that suggest recommendations, view webinars that offer helpful techniques on social service related subjects, and attend lectures from prominent pioneers. Students established rapport with school advisors and members in the community, so they are aware of needs and interest of others. They watch the news and surf the Internet on social concerns.

Scope and Delimitations

I addressed the concerns of why social service employees are not adequately trained, why training is limited, and why their image is not professional. Without their assistance, it is difficult for people to obtain and manage a place to live, food to eat, protection, and health care. The population of this study included residents of Landover, Maryland, in Prince George's County. It excludes other Prince George's County cities. The results of this study may not be transferable to other contexts and settings as it was not a representative sample. It offers insight to heads of social service organizations on the current state and use of employee's talent, time, and the organization's training dollars.

It implies assistance is needed to prepare employees for training, that training is most valuable when aligned with the mission of the organization and guided by managers, training specialists, and HRD specialists. It implies managers attend meetings with other managers to discuss on goings in the organization, which includes employee training. It further implies that managers are aware of organizational issues, expectations, and upcoming mandates, training specialists support managers with training needs, and that HRD specialists offer guidance to respond to change.

This study implies that employees could benefit from meeting and interacting with other employees if required by organizational officials. Employees have varied backgrounds and attend different training sessions and workshops. They interact with different people. Because of the differences, it is possible other employees might find shared information useable on the job. It reveals that stakeholders could add valuable

information to employees. Stakeholders work with individuals in society from the perspective of establishing an agenda, providing funds, creating services, connecting with people of other organizations, and competing with other companies. It reveals that with a policy on learning transfer, employees will receive guidance on training, know what to share and discuss, and how to effectively handle job responsibilities.

This research acknowledges that social service employees play a crucial role in the existence of people in society, but without the assistance of the manager, training specialists, and HRD specialists, they are limited in what they can achieve. Professors in academia, leaders of training institutions, small business owners that focus on training and other stakeholders play a key role.

Limitations

Research studies have limitations; this study is no exception (Leedy & Ormrod, 2005). There were limitations with the sample size, criteria used to invite participants, selection of the research location, and literature. There were 15 participants. Mason (2010) commented that qualitative studies are “generally much smaller than those used in quantitative studies” (p. 1). Qualitative studies are about meaning and are time consuming. Analyzing a large sample takes more time, is considered impractical, and the guiding principle is saturation. The sample must be large enough that relevant information prevails. However, if the sample is very large, data will exceed what is needed. Because of the many things that can determine a sample size, researchers typically do not suggest what determines an appropriate sample size (p. 2). Morse (2000) indicated samples have too many variables. Leedy and Ormrod (2005) mentioned that the number of participants in qualitative studies is usually small because of the time required

to interview or to make observations. Based on the review of the literature, each qualitative research study had a different sample size. Because there is not a set number to use for a sample size, I decided 15, as pointed out in Chapter 3.

Reybold, Lammert, and Stribling (2012) asserted that the selection of participants is a “least critiqued” (p. 700) method in qualitative discussions. To gain varying perspectives, researchers could consider at least two social service organizations in the same state but in different cities to compare similarities and differences. Factors used in the selection of the research location were familiarity with the area, cost, and permission to conduct research. There was an abundance of literature, but not specifically on social service employees and training that involved the manager, training specialist, and HRD specialist.

Significance of the Study

With the United States’ 10-year involvement in the global war on terror, service members have faced mental distress, emotional dilemmas, and the inability to interact with others (Brand & Weiss, 2015). Officials of Veterans Affairs, the Department of Defense, and members of the civilian community consider ways to prepare employees of the social service field to work with veterans. The employees serve at schools, universities, hospitals, and wherever people are “challenged in some way” (Cournoyer, 2013, p. 6). One memorandum, “referenced the need for all patients to receive compassionate care,” mentioned that two hospital patients died alone after a hospital social worker denied same sex patients visitation (Conlon & Aldredge, 2013, p. 20). Unlike the law and medical professions, social service employees’ have a low “work knowledge base” (Gray & Schubert, 2013, p. 337). Their lack of a specific approach to

attain knowledge is confusing. This confusion is caused by limited awareness, work application, the interchangeable use of language in literature.

Cronqvist and Sundh (2013) mentioned that with cuts in spending, healthcare and social service employees can collaborate to provide services to the elderly. They surmised that although collaboration can happen, guidance is needed. Services for healthcare and social services are not funded the same. There is overlap of the profession. The adoption of collaboration creates support, inclusion, and partnered decisions (Counoyer, 2013). Wilson (2013) indicated that commonalities of collaborative partnerships improve efficiency, a greater range of resources, risk sharing, and mutual learning. A collaborative partnership with employing agencies and universities improve education and practice to establish a “comprehensive framework for continuing professional development and workforce planning” (p. 4). However, collaborations must have logical and manageable expectations. If not, results will present conflicts and tensions.

Social service employees advocate for those who have difficulties helping themselves. They draw from knowledge to address social problems, working with people to reach or achieve a quality life. Their responsibilities are broad and cross several disciplines. In their field, laws and regulations constantly change to address what happens in society. They network with other professionals to obtain needed resources (e.g., medical, financial, and educational services). To ensure they keep pace, one of their ethical principles is to increase professional knowledge (Glickin, 2011).

Social service employees have limited training; there are numerous changes to the field. Practice and policy are areas that require attention. Employees need training on

how to collaborate with colleagues, other professionals, and stakeholders to discover issues. Employees need to keep up with changes and build a rapport with individuals in society for success (Iglehart & Becerra, 2011).

Colleagues are needed to provide achievements of what works; help is needed with thinking broadly, using strategic techniques, and offering a mixture of ideas and suggestions. Stakeholders add essential knowledge. Without input from them, employees are not aware of the need to link learning and performance (Walter, Lechner, & Kellermanns, 2016). Paradigm shifts create changes in the way work is handled. Employees must keep up with the shifts to show a strong level of skillfulness. The practice has transitioned from therapeutic intervention, de-institutionalization, and coordination of services to care management (Skerrett, 2000).

Several reasons exist for the selection of a social service organization. First, employees do not see themselves as skilled professionals deserving of “recognition and employment” (Ross, 2014, p. 5). Second, employees need to review “knowledge and skills continually” (Jivanjee, Pendell, Nissen, & Goodluck, 2015, p. 260). Third, the image is simply to provide household chores for the young and the elderly (Reisch & Jarman-Rohde, 2000; Sale, 2009). Fourth, the field struggles to have a clear focus (Reisch & Jarman-Rohde, 2000; Sale, 2009). Fifth, social service employees want members of leadership to “define the profession” (Ross, 2014, p. 5). Sixth, employees want to make “a real difference or significant social change,” but barriers prevent achievements, as exhibited by “frustration, exhaustion, helplessness,” despair, and organizational issues (Ross, 2014, p. 5).

Significance to the Practice

Ambiguities, uncertainties, and tensions cause difficulties in establishing work parameters. The knowledge of employees in the social service field is not always relevant. The employees are not on equal footing, and a common discourse is not known. Continual updates require employees to meet specific standards to address problems and predicaments (Parton, 2000). Employees and managers have difficulties when new knowledge is required, especially when there are changes in regulations. For example, it was difficult with welfare reform, privatization of services, filtering out managed care, and immigration (Austin, 2003; Reisch & Jarman-Rohde, 2000). At one time, the employees' responsibilities shifted to "administrative needs" (p. 1563) rather than client needs (Hair, 2013). Reduction in budget and downsizing resulted in fewer employees being responsible for many. In hospitals, it is the norm to have administrators of nursing supervise social workers. When there is a "cross-discipline" of supervision for recently graduated social workers, their skills are devalued (p. 1567).

The practice calls for employees to use professional judgment, build rapport, embrace diversity, engage providers and other colleagues, integrate learning, collaborate, partner with others, problem solve, involve themselves in the community, maintain social interactions, and share information. Concerns of society are that individuals need protection, assistance with mental health issues and substance abuse. Other concerns are with addictions and traumatic experiences. The practice makes known that employees should assist with healthcare nuances, health care choices, the area of geriatrics, long-term care, fraud and corruption, managing debt, funeral expenses, and with people who

speak a language other than English. Even the employees reveal there is inappropriate training, limited management support, and inconsistent practices (Cherry et al., 2014).

The practice needs employees who can provide services for short and long-term training and attendance at conferences and workshops on expertise offered. Because issues in the field change constantly, employees need to stay abreast. They need to routinely tap into venues that offer new knowledge. Those venues consist of training establishments, people in society, and stakeholders.

Managers, training specialists, and HRD specialists have a responsibility to prepare employees for training by meeting with them, making sure training is aligned with the mission of the organization, that training is meaningful, and that there is interaction between colleagues and stakeholders to better serve people in society. They are to assist employees with clarity and relevant knowledge (as indicated by Figure 1). If this does not happen, the employee is left alone to navigate for self.

Significance to Theory

Managers, training specialists, and HRD specialists have a responsibility to develop employees to meet needs of the social service organization. Managers give direction to accomplish work responsibilities. They ensure training offered is closely aligned with “goals and strategies” of the organization (Bohlander & Snell, 2010, p. 307). Training specialists link learning to business strategies. Human resource development (HRD) specialists arrange learning to improve job performance (Drucker, 1986; Nadler & Nadler, 1990; Sofo, 1999). The discipline of human resource development focuses on individual and organizational performance. It is a process of developing expertise

(Swanson & Holton, 2009). It serves as a “department, function, and a job” and is “the context and content it supplies” (Swanson & Holton, 2009, p. 5).

For purposes of this study, HRD is a process where employees are engaged in innovative ways to improve performance and organizational practices (Swanson & Holton, 2009). Its interventions serve as a function to integrate employees into the organization and to assist with skills and knowledge (Werner & DeSimone, 2009).

Employees must use technology – technology saves money and time. Technology delivers information quicker and allows more people in society to receive service, advice, and information. In other words, it adds to efficiency. The future is dependent on service delivery. Social service employees need assistance with data systems, knowledge of software, and licensing agreements (Carnochan et al., 2014).

Significance to Social Change

Training involves providing employees with knowledge and skills to perform job responsibilities or to make a deliberate change (Werner & DeSimone, 2009). When employees receive training on a consistent basis, it ensures they will meet the needs of people with social problems (Hardina et al., 2007). Training aids are needed in the “treatment and management of psychological trauma, crisis intervention,” and “use of critical event debriefing” (Brand & Weiss, 2015, p. 164). There are various methods of training (e.g., instructor-led, self-study, virtual classroom). A basic learning cycle is to have learners participate in activities where sense is made of experiences. When this happens, it gives meaning and value where employees learn to problem-solve and make decisions (Mackeracher, 2008). This research, a case study on learning transfer in a social service organization, illuminates the concern through consideration of theories by

McGregor (1960), Drucker (1954), Kirkpatrick and Kirkpatrick (2005b), and the HRD function. I presumed managers, training specialists, and HRD specialists of social service organizations needed to assist employees with transferring knowledge from training.

Changes in the field include workplace violence, cross-intercountry adoptions, community development, finance, problem-solving, embracing geriatric patients, cultural differences, and “the failure to live up to expectations” (Gibson, 2014, p. 417).

Employees need training in bereavement, dealing with traumatic experiences, and knowing how to navigate organizationally. With the establishment of the Patient Protection and Affordable Care Act of 2010, professional expertise is needed to understand long-term care for homes and residential settings and to work in close collaboration with the community. Increased knowledge is needed in Medicaid and health literacy. The Dorothy I. Height and Whitney M. Young, Jr., Social Work Reinvestment Act of 2013 indicates the need for mental health experience and knowledge, working with people suffering from drug and alcohol abuse, post-traumatic stress disorders, and the release of ex-offenders. According to Zelnick et al. (2013) and Roby, Rotabi, and Bunkers (2013), employees must believe in the importance of the job and take responsibility for “promoting social justice” (Roby et al., 2013, p. 301).

Summary and Transition

Chapter 1 introduced a description of the topic and its implications. It provided a background, summarizing literature related to the topic, describing a gap that the study uncovers. The research problem is stated. Chapter 2 delves into details about the literature search strategy. The chapter continues with a theoretical foundation and a

conceptual framework that infers a relationship. It continues with a literature review, prior research and current research. The literature review is robust covering methodology, method, and reasoning. It continues with studies from social work education to strategic initiatives.

Chapter 3 provides the research method, which includes the research design and rationale, methodology, a data analysis plan, threats to validity, ethical procedures, and a summary. Chapter 4 explains the results, which includes the pilot study, research setting, demographics, data collection, data managing, categorization of data, data analysis, and study results. It continues with responses to research questions, comparison by title, subgroup comparison, and a summary.

Chapter 5 provides an interpretation of findings, limitations of the study, recommendations, recommendations for practice, and a conclusion.

Chapter 2: Literature Review

Employees of social service organizations have limited training, there are numerous changes, and a negative image. Learning transfer in a social service organization is of dire importance because people in society have a dependency on social service employees for life-sustaining services. When people meet with social service employees, their expectation is to obtain that which is relevant, timely, useful, and approved by the organization.

This chapter includes a literature search strategy, theoretical foundation, and conceptual framework and a literature review. The literature review findings reveal how once the focus gave attention to analyses, good citizenship, social responsibility, transferring intellectual skills and knowledge. The more recent literature focuses on alcoholism, substance abuse, learning, new subjects, relationships and engagement, and technology. Under learning, there are many subcategories (i.e., scarcity of resources, negative encounters with family members, navigating the organization, ethics, teaching practices, global perspectives, information sharing, and the impact of delivery). The new subjects speak of transferring of values, shame, bereavement, logical and intuitive understanding and knowing emotions, and fidelity. The chapter ends with a summary and a transition to Chapter 3. This study is about learning transfer of social service employees where consideration is given to training approval, learning expectations, preparing for training, interacting, determining training guidance, practicing, and collaborating.

Literature Search Strategy

The literature review approach was methodical to obtain information and data on learning transfer and related topics (“Doing a Literature Search,” n.d.). I reviewed and

collected data. I then collated findings to determine appropriateness. I identified places to conduct searches, which were virtual and in person in the Maryland and Washington, DC areas. The virtual searches were to Amazon.com, Google Scholar, Thomas.gov, and the Walden University Library. I rented books for a specific period of time and viewed selected searches on a laptop, desktop computer, and Kindle Fire. I conducted searches in person at the Library of Congress and Montgomery and Prince George's County Public Libraries. Search terms were adult learning, education, learning, manager, management, nonprofit organizations, social security, social service, social worker, training, and training transfer. Additional search topics included elderly and social service departments. The review required an examination of academic and peer-reviewed information, which included dissertations. The search required the use of critical skills to review opinions, theories, topics, research methods, and models. The review included reading textbooks, encyclopedias, and thinking about journals and articles previously read. The review also included examining books, journals, databases with titles on learning transfer, legislation, newspapers, and magazines. for terminology, synonyms, titles on learning transfer, authors, concepts, and legislation

Theoretical Foundation

Each of the theories and the HRD function is based on the concept of management in the areas of learning, involvement, integration, and collaboration. McGregor's Theory X and Theory Y outline that managers, depending on the way they use authority, help or hinder employee performance. Drucker's Theory of Management by Objectives makes it clear that instructions are needed. Kirkpatrick and Kirkpatrick's Four Levels of Training Evaluation Theory reveal the importance of training so that what

is learned benefits the employee and organization. Through the inclusion of the HRD function, society needs are integrated.

McGregor (1960) indicated difficulties with Theory X and Y in the 20th century commenting that Theory X was used to manage objectives and Theory Y led to the “abdication of management” (p. 7). He noted that this abdication led employees to expect more while giving less. He stated, behavior “is not a consequence” of inherent nature, “It is a consequence rather of the nature of industrial organizations of management philosophy, policy, and practice” (p. 8). He implied that managers must do one of two things: motivate employees to work or give them the right organizational conditions to work. According to McGregor (1966), management is responsible for organizing productive enterprise. Cutcher-Gershenfeld (2006) indicated the enterprise consists of resources and people.

McGregor (1966) implied that “the average man” works “as little as possible,” does not have ambition, has a dislike for responsibility, “prefers to be led,” is “self-centered,” and “gullible” (p. 7). Without an “active intervention of management,” employees exhibit passiveness and resist the needs of the organization (p. 7). McGregor commented that managers assume employees are self-motivated. Gurbuz (2014) indicated the assumption is unconscious. Gurbuz (2014) popularized the “idea that managerial assumptions and beliefs are important” when determining a manager’s way of operating” (p. 1888).

McGregor (1966) mentioned so often managers want to know how to motivate. He indicated that managers do not motivate employees; the manager must allow time to

solve problems. The manager's knowledge is limited and time is needed to develop and learn while achieving the goals and mission of the organization.

The difference between Theory X and Theory Y is that one treats the employee as a child and the other treats the employee as a mature adult (Cutcher-Gershenfeld, 2006). Theory X's assumption is that the average employee dislikes work and will avoid it if possible. The employee must be "coerced, controlled, directed," and threatened with punishment" to accomplish work responsibilities (p. 41). The employee's real interest is to obtain security.

Theory Y's assumption is that physical and mental efforts in work is natural where committed employees exercise self-direction and self-control. McGregor's Theory X represents the views of scientific management while Theory Y represents the human relations approach (Griffin, 2013). McGregor (1960) explored ways to manage employees, given what is known about the person. He held a strong opinion about optimizing the effectiveness of organized employee efforts.

Drucker's Management by Objectives Theory work to improve organizational performance by setting objectives through instructions, providing employees with those objectives, monitoring work, evaluating performance, and rewarding performance. It is the responsibility of the managers to constantly observe what is considered "state-of-the-art" to make changes (Drucker, 1990, p. 8). The manager determines the success and survival of an organization (Drucker, 1984). The manager directs "the work of others" while supplying "good and services" (Drucker, 1984, p. 5). Managing takes action. A function of management is to make use of "human and material resources" (p. 11). Drucker (1990) surmised that nonprofit organizations like social service organizations

need “management all the more because they do not have a conventional bottom line” (p. x). He asserted, that nonprofits need to “use management as their tool least they be overwhelmed by it” (p. x). Drucker commented that nonprofits must use management effectively in order to pay undivided attention to their mission. According to him, little has been done to help nonprofits with management in areas of strategies, challenges, and change. He further indicted that something is needed that will focus on the “human and organizational realities of non-profit institutions” (p. ix). Information is needed on managing their performance, “relationships with a diversity of constituencies,” and the employee and “burnout” (p. ix).

Using Kirkpatrick and Kirkpatrick’s Theory (2005a, 2007), there are four levels to evaluate training: Level 1, reaction, Level 2, learning, Level 3, behavior, and Level 4, results. Level 1 is synonymous with satisfaction and is a way to notify the training specialist of his or her effectiveness. At Level 2, the training specialist should know the knowledge needed, skills to develop or improve, and the attitude that should change.

The training specialist determines two things: if the lack of behavior change is due to the employee’s environment or a lack of obtaining the knowledge. If at Level 3 behavior has not changed, training has failed. At Level 4 results can be measured by the quantity of work, increase in profits, and a lower employee turnover rate. Training specialists work with managers to determine the work employees should perform and the behavior changes needed. This is known before the training is designed. The key is to notice issues that can adversely affect performance and limit the effectiveness of training (Kirkpatrick & Kirkpatrick, 2015).

The theory was changed to the New World Kirkpatrick Model. The model retains the original four factors while focusing on the transfer of learning (Griffin, 2013). Based on an interview with J. D. Kirkpatrick, the reason learning and development specialists do not offer evaluations is because most want to examine training effectiveness and not the effect on performance (Griffin, 2013). Another reason is because managers need to support learning transfer. Kirkpatrick insisted there is a need to come together with executives, managers, supervisors, and employees in the workplace.

The HRD field has grown to incorporate activities and processes of knowledge management, learning management, and social capital (McGuire, 2014). McGuire (2014) indicated the HRD field has changed to cover the individual, organization, and society where developments consider culture and value. Accordingly, the heart of HRD is learning. It begins when an individual joins an organization and continues throughout the employee's employment.

Human resource development programs respond to changes (Mohanty & Routray, 2010). Developmental activities offer long-term change where preparation focuses on the future and expanding the employee's job (Werner & DeSimone, 2009). Once employees are proficient in their job, the HRD specialist should encourage the employees to accept greater responsibilities to address work problems and to achieve superior performance. The HRD specialist should, therefore, make sure that managers are competent (Werner & DeSimone, 2009).

To facilitate change, the specialist provides advice on strategies, facilitates meetings, and implements change processes. Werner and DeSimone (2009) mentioned that the specialist participates in the "strategic management process," providing education

and training to managers on “concepts and methods of strategic management and planning,” and providing training that is “aligned with the goals and strategies of their organization” to all employees (p. 14). In small organizations, there may not be a training or HRD department. When there is not, the responsibilities become that of the manager (Werner & DeSimone, 2009).

A presumption is that the theories of McGregor, Drucker, Kirkpatrick and Kirkpatrick, and HRD information should guide learning of the social service employees. I examined themes that revealed the way students were prepared for college, the percentage of training, job focus, and training methods. Three studies similar to the current study are Futris et al. (2014), Kyndt et al. (2014), and Cherry, Dalton, and Dugan (2014). These researchers examined behavior change linked to training, a continuous need for learning, and high turnover due to “inadequate training and supervision” (Cherry et al., 2014, p. 318).

Research builds upon existing theory. This study incorporates the managerial theory of McGregor and Drucker with that of Kirkpatrick and Kirkpatrick, and the HRD function to examine learning transfer. It points to the responsibilities of the manager and training specialist to assist the employee with learning transfer. Human resource development specialists give focus to the future, the organization, and society and is included to impact learning transfer. The organization and society are excluded when learning transfer is not included. It challenges social service organizations to take learning transfer seriously.

Conceptual Framework

Conceptual frameworks allow researchers to make choices about topics and themes in different contexts. They speak to a thought-out relationship or major factors to examine. A characteristic of conceptual frameworks is that they emerge, comprising “personal interests and goals, social location and positionality, topical research and theoretical frameworks” (Ravitch & Riggan, 2017, p. 13).

The framework found on page 15 benefits the study in that it reveals a concept that social service employees are at the center of the organization and society to improve and save lives (Cournoyer, 2013, p. 16). It infers employees play a vital role in the lives of people in need and that they should receive up-to-date and continuous training to offer relevant and timely information. There are three key statements represented in the conceptual framework. The first statement is that the employee is at the center of all levels and that without them being appropriately trained with up-to-date information and application of knowledge, the organization fails to meet its responsibilities. The second key statement is that a relationship exists between society, the social service organization, and the employee through the assistance of the manager, training specialist, and the HRD specialist.

When officials of the social service organization are attentive to the needs and interest of people in society, and receptive to changes in laws, policies, procedures and regulations, they can be effective. The training specialist and HRD specialist will then draft policies and procedures related to training for consideration. Once approval of the policies and procedures, the training specialist and the HRD specialist will relay the information to the manager. The manager will then instruct the employee about its

application. The third statement is that there is engagement where the employee takes up-to-date knowledge and application to the people in society to assist with social problems.

When leaders of social service organizations are in tune with concerns of people in society through continued awareness, they direct training specialists and HRD specialists to support necessary training and to provide the manager with clarity of expectations to approve training. The manager then presents information to employees and provides approval to attend training. After training, the employees will then present vetted, new knowledge to people in society. The employee has received current and up-to-date training.

The conceptual terminology includes employee, manager, Kirkpatrick and Kirkpatrick, social service organization, and society. The employee is now knowledgeable of the expectations of the job, approval and instructions have been given by the manager to the employee to interact with people in society. The social service organization is in touch with what happens in society and society is in touch with the social service organization.

Concepts applied previously focused on ways to prepare students for work, obtaining the most from learning, building rapport, and establishing policies. For example, the literature on preparing students for work mentioned how students were not interested in some areas but needed more practice in community efforts (Nadel et al., 2007). In terms of obtaining the most from learning, one individual indicated having expectations prior to training but having to comply with what was taught (Werner & DeSimone, 2009). Building rapport had to do with the employee being more assertive to obtain resources for clients (Andrews et al., 2013). Barriers were about fraud and

corruption that centered on adoptions and its importance to social service employees (Roby et al., 2013).

More recent concepts include objectives, lifelong learning, professional judgment, traumatic experiences, and the inclusion of logic and intuition. Kyndt et al. mentioned that because there are continuous changes in the field, lifelong learning is imperative. Trevithick commented on the importance of professional judgment, and Bernhardt covered professional development. There are benefits from the conceptual framework in four ways. First, it offers structure that creates cohesiveness and partnership. Second, it highlights an approach to close a training gap. Third, it makes the manager, training specialist, and HRD specialist accountable for organizational training. Fourth, it emphasizes a path to continued and updated knowledge.

Literature Review

Transfer of learning consist of changes in the field, relationship building, education, resident involvement, use of strategies, offering feedback, values, curriculum development, technology, information sharing, political influence, and social interactions. The chosen methodology and methods consistent with the scope is qualitative. Several reasons exist for the use of a qualitative method. First, qualitative research is social interaction without the use of artificial procedures (Yin, 2011). Second, participants are not represented by a statistical formula but real-life individuals. Third, the data represent the perspectives of individuals' thoughts and opinions and not "the values, preconceptions, or meaning held by researchers" (Yin, 2011, p. 8).

Qualitative research is the explanation of events through the emergence of concepts (Yin, 2011, p. 8). The researcher triangulates data to add to "the study's

credibility and trustworthiness” (Yin, 2011, p. 9). Qualitative researchers “immerse themselves, viewing meaning as more context-and time-specific” (Lapan, Quartaroli, & Riemer, 2012, p. 1). They are attentive to reactions and voice (Marshall & Rossman, 2016).

Qualitative research is rooted in the philosophy of observation, inquiry, and exploring diversity where emphases are placed on descriptions and narration of experiences (Kumar, 2014). Research is interpretive; the major focus consists of describing, analyzing, and interpreting. It has a systematic process that involves deliberate decisions based on specific procedures. The consent form contains explicit procedures for participation. It utilizes a conceptual framework, as identified in Figure 1, to organize ideas. With qualitative research, an exploration is made to find out how the participants’ context influences behavior and experience.

Qualitative research engages participants in their environment or setting, which could lead to the observance of inappropriate behavior and context (Gay & Airasian, 2000). It allows participants an opportunity to discuss daily life and describe ways to cope. The setting allows the capturing of what happened, how it happened, and involvement and interactions among people. Yin (2011) mentioned that with qualitative research, arrays of topics are studied and are not constrained by conditions. Alternatively, the unavailability “of sufficient data” or the “lack of coverage of sufficient variables” does not prohibit research (p. 6).

The method provides a rich description and narrative of journaled complexities of experiences that happen in a natural setting (Lapan et al., 2012). The approach favors “intensity and depth” (Lapan et al., 2012, p. 19). As Lapan et al. (2012) mentioned, a

qualitative method uncovers meaning through interpretation of experiences where the researcher holds the perspective of interpretive or critical. The interpretive path adds meaning to interactions, perceptions, and individual uniqueness. Open-ended questions capture experiences and clarify assumptions and thoughts. The critical perspective focuses on the integration of power to the individual, organization, and society. The method offers uniqueness and variations, which includes more than methodological considerations (Yin, 2011). They are preferred when questions include how or why and when there is limited control over the situation (Marshall & Rossman, 2016). Researchers address questions in a setting where the phenomenon occurs (Mumford & Hazard, 2015). It provides insight of what participants think about things that happened, using interpretation to analyze data, and articulating depth of perspective (Gay & Airasian, 2000). As Gay and Airasian reported, conversation, documents, interviews, and observations are examples of relevant data.

The analysis is inductive with an immersion of “details and specifics” to find pertinent categories, “dimensions, and interrelationships” by exploring open questions (Gay & Airasian, 2000, p. 205). There is a holistic perspective to understand complexities where attention is given to interdependencies (Gay & Airasian, 2000). The data consist of “detailed, thick description,” and in-depth inquiry with quotations to capture the participants’ “perspectives and experiences” (Gay & Airasian, 2000, p. 205). Findings are in contexts. There is passion to understand the “world in all its complexity” (Gay & Airasian, 2000). The research is adaptive to inquiry and avoids being rigid (Gay & Airasian, 2000). Findings are descriptive, and generalizations are not the emphasis. The approach presents a way of understanding without a testing of hypotheses. What is

being tested is not in control of the researcher. The participants provide an analogy of what is being explored or examined (Mumford & Hazard, 2015). Mumford and Hazard (2015) mentioned, knowledge is gained of the social world in a natural setting.

Case studies are “especially suited for learning more about a little known or poorly understood situation” (Leedy & Ormrod, 2005, p. 135). They are especially important for examining changes of people and programs over time (Leedy & Ormrod, 2005). A case methodology brought a real-life account of the employees’ expectations of learning and sharing. Employees had sufficient, institutional knowledge to provide meaningful data. Many approaches on the concerns of the social service employee were consistent, apart from household chores for the young and elderly.

Prior Research

Training Needs of Social Service Employees. Hawley and Barnard (2005) asserted that if training is to transfer, employees must have a positive organizational environment. Liebermann and Hoffmann (2008) mentioned that managers must allow employees to feel in control of learning after training.

Roberts (2009) mentioned that social service employees work with individuals who need assistance, even protection. They pay attention to forces that contribute to the problems of living, but the changes to welfare reform legislation, privatization of services, managed care, and immigration reveal a need for continual updates. Hardcastle, Powers, and Wenocur (2011) reported that the field of social work started in community practice where referrals were made, resources were provided, and the employee advocated for the clients’ needs. Now community practice requires the social service

employee to use theories, improve quality of life, and commit to the betterment of society where an investment is to facilitate change.

In the United States, for the past 10 years, there have been efforts to hire social service employees for the field of gerontology (Simons et al., 2011). The John A. Hartford Foundation “invested over \$60 million to support the education and training of social workers” in the field of aging (Simons et al., 2011, p. 183). The approach used was to build the curriculum, create internships, and work through research (Simons et al., 2011).

Iglehart and Becerra (2011) surmised that to understand the needs of the social service field, one should learn from the past and recognize that the United States population is a mixture of individuals from various locations who speak different languages. There are many cultures and different images to guide present day thinking. Demands come from individuals in poverty situations and those who are facing discrimination. Employees must embrace diversity and adapt where there is respect for ethnicity. The employees must build rapport to be successful. At times, a client’s culture is “treated as homogeneous and static while its social context and environment are overlooked” (Iglehart & Becerra, 2011, p. 4).

To assist with change, social service employees observe the National Association of Social Workers’ Standards for Cultural Competence in Social Worker Practice, which covers awareness, cross-cultural skills, delivery of services, advocacy, diversity, language, and leadership. The role of a social service employee is to assist those intricately connected to poverty. Their challenge is to determine how to help people in need.

Employees play a role in providing information that outlines health choices (Andrews et al., 2013). However, they must understand relationship building and social networks to obtain health-related resources. They need familiarity of individual needs, cultural differences, and health literacy to collaborate with communities. Because of the Act, opportunities will exist for social service employees. Medicaid agencies will “become the single most powerful decision makers in behavioral health” and advocates and researchers of social work will need to establish relationships (Andrews et al., 2013).

Roby et al. (2013) mentioned that fraud and corruption cause barriers to intercountry adoptions (ICAs). This is important to individuals in the social service field for two reasons: the high adoption rate and integrity issues. Social service employees assist hundreds of adoption agencies in the United States. Within the agencies, professional accountability is needed to meet accreditation requirements in practice and leadership (Roby et al., 2013). To work in adoption, employees must have human rights and a global perspective of the practice. Employees need to accept responsibility for social justice. Attention is needed on ICA, scarcity of structures, and a healthy society (Roby et al., 2013).

Parrish et al. (2013) used a self-study method to engage providers in community development to meet the needs and interests of residents. With limited resources, sponsors prioritized service by partnerships. Parrish et al. suggested establishing policies, reflecting on current provider roles, preparing and practicing with residents, integrating social principles, and creating resident involvement structures. They also mentioned the importance of collaboration, stating “Collaboration is a learned behavior” and that

“interorganizational collaboration and community involvement are essential” to be successful (p. 355).

Despard and Chowa (2013) found that in the United States, there are financial woes because of unemployment and the low value of homes and foreclosures; families have difficulties coming up with “\$2,000 within 30 days to cope with a financial shock” (p. 689). Low income and middle-income families consider themselves to be financially strapped. In another study, “Applied Research and Consulting,” randomly selected United States families found that people had problems with monthly debt and “paying off credit card balances in full” (p. 689). People had a lack of financial understanding and no capital. When compared to those with higher incomes, lower-income people were likely to experience financial stress and use financial services that offer higher interest rates. They underutilized tax benefits and encountered “poor economic mobility prospects” (Despard & Chowa, 2013, p. 690).

Social service employees work with individuals when it comes to managing debt, avoiding “predatory loans and financial services,” claiming “earned income tax credit,” developing “household budgets,” accessing and using “conventional financial services,” and building assets (Despard & Chowa, 2013, p. 690). The “University of Maryland hosts the Financial Social Work Initiative” to teach social workers to help people in financial disarray (Despard & Chowa, 2013, p. 690). The course was designed for social work students to assist with a positive change in money management of checkbook balancing, saving, establishing goals, and checking reports of credit. The students “perceived financial literacy relevant to social problems” of “parental conflict, depression and anxiety, and poverty” (Despard & Chowa, 2013, p. 691). The results indicated that

most of the respondents worked at a nonprofit organization which included case management, financial education, and counseling. The major reason for a social worker's noninvolvement was that they lacked skills and time, and the clients lacked the ability to pay for financial services.

Legislation. The Patient Protection and Affordable Care Act of 2010 guarantees health care for nearly all Americans. Earlier, "45 million Americans" were uninsured, and those with insurance had difficulties because of financial hardships (Kocher, Emanuel, & DeParle, 2010, p. 536). The Act did away with limits, it lowered the cost of health care and made it less cumbersome for physicians to obtain tests needed for treatment. It changed medical practices to include coordination and greater details and it informed physicians if patients were taking medication and receiving appropriate care.

The Act reduced barriers of administrative complexities, limited data, and limited access to care and providers (Kocher et al., 2010). Because of the Act, administrators created policies and incentives that provide physicians and patients with clinical data to make constructive choices. The Act included a 10% payment bonus, "funding for the National Health Service Corps by \$1.5 billion over 5 years," and "millions of dollars in additional funding" (Kocher et al., 2010, p. 537). It created changes in social service organizations, and now employees can work more as leaders (Andrews, Darnell, McBride, & Gehlert, 2013). The reforms resulted in an expansion of Medicaid, and helped to establish dialogues where approximately 30 million Americans gained coverage (Andrews et al., 2013).

The Patient Protection and Affordable Care Act of 2010 gave social service organizations responsibility to determine community care and support for individuals.

The social service employee's role changed from generic to "professional specialization" (Andrews et al., 2013, p. 18). Employees and managers actively engage in the pursuit of requirements where they become "enablers rather than providers" (White & Harris, 2001, p. 16). Social service organizations must find providers and juggle funding (White & Harris, 2001). The Act allows for community long-term care in personal homes or residential settings. It replaced Family Practitioner Committees with Family Health Services Authorities and established trusts.

The Dorothy I. Height and Whitney M. Young, Jr., Social Work Reinvestment Act of 2013 reported that since the 2008 recession, unemployment is high and poverty is up. Fiscal insecurity has added to mental concerns, violence in the home, suicide, substance abuse, and crime. Social service employees earn lower salaries, work in challenging organizations, and are required to take on more clients. Per the Act, 72 percent of social workers who graduated with a Master of Science degree accrued \$35,500 in debt, and 44 percent face violence (H. Rep. No. 1466, 2014). Moreover, "48 percent of assaults occur in the health care and social services industry," every "41 seconds a child is confirmed" abused or neglected, and every "6 hours a child is killed" (H. Rep. No. 1466, 2014, pp. 4-6).

Social service employees provide most of the mental health counseling in the United States. In rural areas, they are often the only provider. The population of veterans of 22,658,000 need mental health treatment for depression, substance addictions, post-traumatic stress disorder, and suicide tendencies (H. Rep. No. 1466, 2014). Social service employees need to work with 650,000 ex-offenders to reduce recidivism and to assist with community re-entry (H. Rep. No. 1466, 2014).

The Patient Self-Determination Act of 1990 guarantees patients' "end-of-life" care is honored (Davis, 2013, p. 462). Davis commented that elderly African Americans have the smallest completion of advance directives when compared to other racial groups in the United States. The reluctance to complete directives is fear associated with the Tuskegee Syphilis Experiment conducted by the U.S. Public Health Service when African American men were merely observed and not treated for syphilis. An advance directive is considered a "death warrant instead of the right and freedom to ask for" health care (Davis, 2013, p. 465).

University Offerings. Nadel et al. (2007) contended that although social work education at the baccalaureate level prepares the student to work efficiently as a generalist, students are not as interested in areas of analysis when it comes to social policy, community practice, or research. Green (2013) indicated that research from universities on the transfer of learning contributes to employability. The transfer of learning plays a role in education where consideration is given to how knowledge is understood. Higher education institutions are working to develop partnerships with individuals in the industry where "graduates transfer inventoried skills and knowledge to the workplace" (p. 367). Education from liberal colleges focuses on "strong and transferable intellectual skills and knowledge," good "citizenship and a sense of social responsibility" (p. 368).

Transfer of learning falls into two categories, "cognitive/metacognitive" and "sociocultural camps" (Green, 2013, p. 368). With cognitive/metacognitive learning, the environment or instructional strategies are not addressed and the "characteristics of the learner" are goals. Green stated, sociocultural "formed by society and culture" is "often equally important" and should "not be forsaken" (pp. 369 - 373).

Current Research

Training Needs of Social Service Employees. Bai (2014) mentioned that social work was introduced to China in the 1920s by missionaries from the Western World. Before 1949, China's social provisions were for the relief of famine. When the Communist Party took over in 1949, the government provided social welfare for housing, food, education, child care, health care, income protection, and a pension for the elderly. However, beginning in 1978, individuals no longer received social welfare. The government of China reinstated the use of social work with legislation to adhere to family responsibilities. Family sizes got smaller, and the divorce rate rose, which revealed "fewer people in stable family relationships" (p. 500). Younger people moved away to obtain employment, leaving the elderly and young children to care for themselves. The change resulted in a need for professional care, challenging family values. Bai asserted that social workers must assist people with transformation of values. The agenda for the Chinese government shifted from economic growth to social development, re-establishing the social work profession to problem solve.

Based on information provided by Boitel and Fromm (2014), field education is the "social work education's signature" (p. 608). The Educational Policy and Accreditation Standards now include competencies where students must demonstrate skill and understanding. However, there was a challenge with determining features consistent with meaning. The standards committee assessed Shulman's criteria for teaching, accountability, and anxiety (Boitel & Fromm, 2014). The committee concluded, "the variability of field education complicates evaluation of student progress"

(Boitel & Fromm, 2014, p. 619). Boitel and Fromm then proposed objectives for learning and competencies to determine effective ways for social work.

Lifelong learning is a necessity for employability and competitive advantage (Kyndt et al., 2014). Because of the continuously changing profession, care workers need continuous learning. Kyndt et al. (2014) stated, “Society has grown into a knowledge society” where employees are expected to obtain knowledge, have strategies, and “work efficiently” (p. 2392). They asserted that the employee could learn a great deal from colleagues.

For example, Trevithick (2014) commented that “managerialism” (i.e., emotions, empathy) is a part of social work without carefully considering its value. Professional judgment is needed to determine “how or whether to follow procedures and guidance” (p. 300). When clients have a sense of shame associated with limited funding or humiliation, the social service employee should have skills to ask questions that result in thought-provoking responses.

Clients struggle with bereavement or other traumatic experiences, and the social service employee should be aware that the person is not able to make decisions. Clients may have a poor memory or are unable to achieve routine expectations. Employees have large caseloads and administrative responsibilities, leaving limited time to build relationships that factor in emotional needs or that considers the client’s feelings. Trevithick (2014) stated “logical and intuitive understanding” (p. 295), and knowing about emotions, should be taken into consideration when thinking about what training to attend.

University Offerings. Futris and colleagues' (2014) study on the training of child welfare professionals considers links to transfer learning. Their purpose was to develop and field test a new curriculum that focused on "strengthening healthy couple and marital relationships" that facilitated stability and promoted "child safety and permanency" (Futris et al., 2014, p. 561). They mentioned that to change behavior is difficult. They used a non-experimental design and data from five surveys. They indicated that future research is "needed to understand the fidelity with which trainees apply tools with clients" and their circumstances (Futris et al., 2014, p. 578).

In the rural Appalachia, "15.2 % of the population is 65 or older" in comparison with "13.2% of the overall U.S. population" (Pope et al., 2014, p. 522). Young people leave the area in search of employment and a segment of the culture "age in place," which may be detrimental to access medical care (Pope et al., 2014, p. 524). Themes in the study included limited resources, values of family members and neighbors, and "the prevalence of drug use" (Pope et al., 2014, p. 522). Older adults rely on family and friends for care. Transportation and doctor's appointments were problematic, and there were minimum social services. For example, the "nearest grocery store for some people is twenty miles away" and the most they can receive each month is "\$700.00" (Pope et al., 2014, p. 527). Access to the Internet is limited. There is a little reception for cell phones; people do not have cable television, running water, or electricity. When it came to valuing neighbors and family, the people who did not leave cared for one another. Elderly people sell their prescription medicine or do without it because family members borrow them. They rent "their kitchen tables for people to use for selling drugs" (Pope et al., 2014, p. 530). In some situations, alcoholic children take "advantage of the parent"

(Pope et al., 2014, p. 530). Addictions go unreported. Service providers refuse to visit the homes because of negative encounters with clients and family members.

Mooney, Collie, Nicholson, and Sosulski (2014) mentioned that an undergraduate education equips students with the fundamental know-how for workforce preparation or graduate study. A necessary skill is the ability to “navigate the organizational; and technological aspects of research data production (p. 368). The “library and information science profession” contributed to training in “research data management” (p. 368). Based on the 2011 requirements of the National Science Foundation, management has “pushed research data management into the spotlight of scholarly communication crisis” (p. 369). Data management is an expected job skill and without it, “we risk exacerbating the deficiency by producing an underprepared workforce” (p. 370).

Richards-Schuster, Ruffolo, and Nicoll (2015) mentioned the importance of Social Worker’s Code of Ethics. Richards-Schuster et al. indicated that with all the frequent changes in the field, there is a need to return to its roots of social consciousness, community models, and social activism. Community involvement and social change improve society where it increases participation and challenges systems. Social work is rooted in community involvement. It focuses “on individual problems without shifting” to causes (Richards-Schuster et al., 2015, p. 331). There is a need for universities to offer multidisciplinary social work programs. Scholars reaffirmed the need for civic competencies at the undergraduate level. Presently, the focus is on civic, social, and community interactions (Richards-Schuster et al., 2015).

Bernhardt (2015) examined a professional development program in a teaching facility and found a disconnection between the past and future. As reported, the 21st-

Century is “a time of rapid, immeasurable” change, especially with “science, technology, and globalization” (p. 1). Needed are “teaching practices that not only align with workforce preparation but” embrace collaboration (p. 1). Students need experiences that “prepare them to solve complex problems, adapt” to change, “utilize technology,” and “network with other like-minded individuals” (p. 1). As Bernhardt indicated, professors must have thoughts and ideas that are 21st-Century focused.

The literature highlighted rapid changes, political influence, global, and domestic economies. Social responsibilities of schools should provide intellectual stimulation and opportunities that are engaging (Bernhardt, 2015). Educators need to “embrace a commitment to a 21st-Century attitude” link technology, become culturally aware, and acquire a global perspective (p. 3). Educators must have “opportunities to analyze, evaluate, synthesize and create” (pp. 3-4).

Employees enter the workforce with standards and goals relevant to them later find the goals conflict with job requirements (Gibson, 2014). When pressured to perform, it interferes with what “they consider to be good practice” (Gibson, 2014, p. 422). They practice with “care, trust, kindness and respect,” but should also address shame individually and organizationally. Shame affects their physical, mental, and behavior state. When asked to identify a decision for service or the organization, they “feel negatively judged by seniors, managers and colleagues” for not abiding by the expectations of the organization (Gibson, 2014, p. 423).

Carnochan et al. (2014) examined the experiences of performance measurement effectiveness processes of four nonprofit organizations. They mentioned that organizations must draw from the “best forms of evidence available to design,

implement, and evaluate services” (p. 1015). Challenges were that nonprofit organizations had limited staff and technology deficiencies. Carnochan et al. mentioned that despite needs, “empirical research remains limited” (p. 1015). Carnochan et al. emphasized that the role of the stakeholder is to establish goals but has received limited attention.

The study focused on staff perspectives of client outcomes, technology, and supportive performance management. Regarding client outcomes, Carnochan et al. (2014) raised concerns regarding defining outcomes and approaches to achieve complex goals. There were tensions, “a lack of systematic processes for defining outcomes” (p. 1019), and issues with sponsors and staff on the clients’ process. Regarding technology, Carnochan et al. found that employees underutilized data systems and had limited knowledge regarding software. The organization had licensing agreement issues. For supportive performance management, feedback was not timely, and there were trust issues with management and program-level employees. Future research is needed on the improvement of delivery and information sharing.

Quinn and Bunderson (2016) asserted that people in organizations learn a great deal from social interactions. Learning occurs from feedback, observations, and socialization. However, the type of interaction is also necessary. Huddling is “unofficial gathering” of two or more people who get together to discuss work-related issues (p. 387). Huddling is informal and highly tasked focusing. It may include “problem-solving, information sharing, and collaboration” or “casual talking” (p. 388). Huddling as an event, not a group. Quinn and Bunderson’s framework is grounded in “experiential learning,” drawing from “Dewey, James, Piaget, Lewin, Jung, Freire, and Rogers” (p.

390). The study took place in a “newspaper newsrooms” because it allowed for life learning with exchange (p. 390). Quinn and Bunderson (2016) asked open-ended questions about facts, performance, and conversations. The study found that individuals learned significant things when the topics were relevant to the job, pay, and feelings. When it came to “tenure heterogeneity” or a topic related to “learning importance,” the relationship weakened (p. 409).

Legislation. The President has proposed budget cuts to Community Services Block Grants, the Low-Income Home Energy Assistance Program, Community Development and Affordable Housing Program, Senior Community Service Employment Program, Neighborhood Reinvestment Corporations, and the U.S. Interagency Council on Homelessness. Several of the reasons given for the cuts and reductions are duplications, ineffectiveness, lack of results, and the desire for privatization (USA Today, Korte, 2017).

The President’s proposed budget is slated to cut the state of Maryland’s Medicaid funding by 12 percent and the anti-poverty programs He plans to shift the Supplemental Nutrition Assistance Program from the federal government to the state of Maryland. Further, plans are to eliminate the Appalachian Regional Commission that provides development in parts of Maryland (Trump Budget Proposal Would Slash Investments in Anti-Poverty Programs, Shift Costs to Maryland).

Summary and Conclusions

The chapter went into detail about the literature search strategy and the theoretical foundation of McGregor, Drucker, Kirkpatrick and Kirkpatrick, and human resource development. It provided an explanation of the conceptual framework, explaining its

usage and characteristics, concepts, inference about what social service employees do to assist people, and it the needs of employees to provide up-to-date information and efficient and timely service. It gave an account of what the manager, training specialist, and HRD specialist should do for the employee and organization. The literature review began with transfer of learning and continued with qualitative research, qualitative method, and case studies. It presented prior research and current research with subsections on training needs, university offerings, and legislation.

Chapter 3: Research Method

The purpose of the study reveals the way social service employees transfer learning to the organization after attending training. The chapter covers the research design and rationale, mentioning the suitability of the method and why, sharing what the design answers. It speaks to the reasoning of why other methods were not used, explains why a particular method was used, goes into detail about the goal of the selection, and makes known my responsibility as a researcher. It covers the role of the researcher, position of authority, competencies, the approach used to minimize bias, and conflict. The methodology section mentions the way I went about obtaining data. It relays the participation selection logic, instrumentation, procedures for recruitment, participation, and data collection. It provides the data analysis plan and issues of trustworthiness, which highlights credibility, transferability, dependability, confirmability, and ethical procedures. The chapter ends with a summary.

Research Design and Rationale

The design suitable for this work was a case study because of the complexities to understand experiences of the agency under study and to describe familiarization of learning transfer expectations. The design answers the questions of how managers, training specialists, and HRD specialists familiarize employees with learning transfer expectations. It answers the factors or conditions that address the learning transfer function or activity. It informs what is done in the event there is not a learning transfer initiative or instructions and speaks to the way employees use what was acquired in training. Finally, it makes known the way managers, training specialists, and HRD specialists use learning acquired from employees who attend training. I based the

questions on employees receiving limited training, numerous changes to the field, and an image associated with household chores for the young and elderly.

A phenomenological study was not chosen because it examines a “particular situation” (Leedy & Ormrod, 2005, p. 139). A phenomenological design offers a reflective way of looking at “everything in the natural attitude,” becoming a philosopher, and describing findings by way of an analysis (Sokolowski, 2000). With phenomenological studies, the researcher is an interested, detached observer, and spectator. The researcher “suspends any preconceived notions or personal experiences” (p. 139) that might influence thoughts (Leedy & Ormrod, 2005).

A grounded theory study was not chosen because it focuses on a process to develop a theory (Leedy & Ormrod, 2005). It refers to a theory that is established inductively from much data (Borgatti, 1996). Borgatti (1996) mentioned that if the study is completed appropriately, “the resulting theory at least fits one dataset perfectly” (p. 1) and its process guarantees a theory as an outcome.

An ethnographic study was not chosen because it focuses on daily behaviors to identify norms, beliefs, and cultural patterns (Leedy & Ormrod, 2005). Ethnographic research tells a story where individuals are given a voice through quotations and descriptions of events (Fetterman, 2010). It starts with a question, problem, or theory and a preconceived idea of how the participants will behave. The researcher interprets behavior, making assurances to incorporate the participant’s culture. Focus is on predictable patterns. The researcher’s bias is controlled or uncontrolled. The controlled bias is made known and stops within the confines of the study. When uncontrolled, bias goes beyond the boundaries of the study. O’Reilly (2012) asserted that when conducting

ethnographic research, there is a tendency to omit the culture, feelings, and opinions of the participants. He mentioned to include theoretical perspectives so there is clarity of daily social life. The method to undertake is realized when the ethnographer examines the social life of research. LeCompte and Schensul (2010) commented that an ethnographer should determine what is needed about the individuals before providing an interpretation. The researcher uses his or her eyes and ears to collect data.

After examining case methodology, phenomenological, grounded theory, and ethnography designs, I decided on a case approach with a holistic perspective. It gives the researchers an opportunity to experience participants' reality as an individual in the environment. The environment conveys "richness and complexity of everyday life" (Yin, 2005, p. 4). A case study gives the "feel of an unobtrusive observer" (p. 4). A case study is appropriate for learning about something that is not clearly understood (Leedy & Ormrod, 2005, p. 135). It examines how individuals or programs change "over time" (Leedy & Ormrod, 2005, p. 135). An example is the 1953 study of "H.M.," who suffered "damage to a brain area known as the hippocampus" (p. 85). In this example, "psychologists learned that the hippocampus" is a "structure for encoding or retrieving memories of events" that could improve "tasks over time" (p. 85).

The goal of a case approach is to make known reality where consideration is given to gaps and insight (Busi, 2013). It focuses on real-life settings where insight identifies gaps and "add to the existing body of knowledge" (p. 43). As a researcher, I have a responsibility to add to the body of knowledge for understanding and future research. I attempted to do this by offering the current case and concluding with

recommendations, social change implications, and practice to increase an understanding of learning transfer.

Role of the Researcher

As observer, I had to “undertake in-depth, in-context research” where I maintained a physical presence in the setting (Gay & Airasian, 2000, p. 18). For example, I scanned the environment, the physical context for symbols and displays, and the neighborhood noting upkeep, deteriorations, visual cues of time, space, and appearances of stress. As an interviewer of qualitative research and someone who cares about data, I spent time researching the topic, ways to conduct interviews to ask pertinent questions, and strategies of listening. I asked questions of people in the field, reviewed newspapers, journals, reports, and examined how news reporters, government and private officials interviewed and were interviewed by others. I listened and reviewed literature (Yin, 2011). Yin (2011) asserted that listening goes beyond hearing, it entails calling on intuition. For example, I noticed the participants’ mood, “friendliness or aloofness,” body language, and “intonations” to hear the “spoken words” (p. 26).

I did not and do not have a position of authority or a personal relationship with the participants. My core competencies to conduct studies included having a clear understanding of the issues and responding to contradictory information, while avoiding biases that come from preconceived beliefs and values. Maxwell (2013) indicated that one must recognize the fallibility of any method and “triangulate in terms of validity threats” (p. 128). He continued asserting that triangulation is a way to reduce “the risk of chance associations and of systematic biases” but the realization is that there will be biases (p. 128). Knox (2010) stated, “Being human, we all have biases” and as

researcher's we have bias (p. 115). Picardi and Masick (2014) stated, every "measure of human behavior has some degree of error," random or systematic (p. 44). Singleton and Straits (2005) asserted, it is difficult to avoid bias and Kumar (2014) commented that bias is a tendency to make known an idea or opinion without the consideration of others because of interest. Kumar further asserted that adherence to the omission of bias and subjectivity helps to call the process research.

As a researcher, I attempted to minimize bias in several ways. First, I continuously used the theory of McGregor, Drucker, and Kirkpatrick and Kirkpatrick to guide the study and not my personal opinions, ideas, or beliefs (Miller & Johnson, 2014). Second, I established criteria for individuals to participate. The criteria were based on background, knowledge, and application of the social service field, which was needed to respond to questions. Third, data were triangulated, using multiple sources of evidence (i.e., interviews, direct observations, and creating a case study database of notes to maintain a chain of evidence. Data were linked from the database to the research questions and cited (Yin, 2009). Fourth, direct quotes were provided (House, 2010). Contradictory data was examined for an explanation. Fourth, participants reviewed transcripts (Appendix D).

As researcher, I have no plans to conduct a study within my work environment on the subject. There are no conflicts of interest, power differentials, or justifications to use the study as an incentive.

Methodology

Research is a way of providing credible information about an inquiry (Gay & Airasian, 2000). Its purpose is to “gain understanding about some issue or topic” not completely understood to help others understand, “predict or improve future research and practice,” or to raise a new understanding or different approach. In research, inductive or deductive reasoning is used to help with understanding. As a researcher of this qualitative study, I provided a description of the topic and executed procedures necessary to obtain data. After which, I analyzed the findings and offered recommendations.

Researchers look to solve “real-world” (Emmel, 2013, p. 35) problems, an approach to the problem is considered before the theory. I worked to understand the world “through concepts, knowledge and acts” (Maxwell, 2012, p. 6). I served as a researcher “internalizing the research goal while collecting data in the field” (Gay & Airasian, 2000, p. 212). The approach was “naturalistic, encompassing holistic inquiry about participants” understanding of their natural setting or environment (p. 212). My field notes served as the record of what was experienced. I conducted interviews to obtain data not available by observation. Singleton and Straits (2005) commented that after defining a target population, the researcher must determine the sample size.

Participant Selection Logic

A population is a group of individuals to study. Choosing a narrowly defined population saves time and money, but generalizability is lost. It is important to define the population to allow others to replicate for future situations. The researcher must describe the number of participants and provide information. Qualitative researchers usually have small samples and sampling is “almost always purposive” (Gay & Airasian, 2000, p.

139). As Gay and Airasian (2000) stated, “randomness is rarely part of the process” (p. 139).

For this study, I targeted three groups: managers, training specialists, and HRD specialists. The goal was to obtain how employees of a social service organization transferred what was learned after attending training. The objectives were to find out how employees were familiarized with expectations of learning transfer, the function or condition that addressed the learning transfer function or activity, and if learning transfer was not utilized, the way employees integrated what they learned in training to the organization. Although only fifteen individuals were invited to participate, I believed saturation would occur with this number of participants. I requested to interview 15 employees for approximately 45-minutes to one hour. I made it known that the participants had to have at least five to six years of work experience, expert working knowledge of the importance social service organizations play in society, that they had knowledge of the various types of training offered to employees, that they held an advisor’s role in training or facilitated training in the organization.

A convenience sample, as used in this study, includes employees who made themselves available (Gay & Airasian, 2000). There was no fee to participate. Individuals signed up to participate after I provided a presentation of the study. It made the selection process fast and non-complicated. With the use of convenience sampling, researchers can conduct studies at places with a lot of social involvement (Emmel, 2013). A convenience sample gives those who are curious about the presence of a researcher and the topic an opportunity to participate. The individuals were given a choice to participate (Singleton & Straits, 2005).

Instrumentation

The instrumentation tools were being an observer, interviewer, and note taker. As observer, I had an opportunity to garner a perspective in four areas: before gaining access to the research site, the organization (internally and externally), individuals during the presentation process, and the participants while interviewing.

Observer. Prior to gaining access to the research site, it was difficult. I went to the organization to find out how I could conduct a study. I spoke with a few individuals and learned about the services offered, but it was not until I contacted the County Executive's Office of Prince George's County that I was referred to the Director, Prince George's County, Department of Social Services, for assistance. After contacting the director, I was put in touch with a point of contact who guided my efforts until leaving for employment elsewhere and referring me to an interim bureau chief. Speaking with the interim bureau chief led to my presentation with individuals of the social service organization. During the presentation of my research study, I thanked several individuals for their assistance, provided information on the purpose of my visit, gave the background, purpose, and nature of the study. Finally, I provided information on the significance of the study. It was at the presentation that employees listened and asked questions for clarification. Afterwards, individuals began signing up to participate in the study.

Interviewer. After obtaining informed consents (Appendix E), I interviewed the participants (Appendix F). I found them punctual, willing to engage in the research process, and generally forthcoming with information. They had sufficient time to collect

thoughts and revisit notes. I had ample time to check with participants for clarification of data.

Note Taker. Notes were taken in the field after interviewing participants when information was current (Gay & Airasian, 2000). After long intervals between the observation and writing notes, field notes were transferred and typed and entered into a computer for analysis. Notes in margins were reviewed, giving an impression of the encounter, tone, and any thoughts or ideas that come to mind. The notes included descriptions, the number of individuals involved, and any unusual occurrences. Yin (2011) stated, “field notes cannot be replaced” (p. 29). Canfield, Wilson, and Schaller (2011) indicated that people who study nature are “bound by a shared curiosity” (p. 1). What makes their work rich is the “human experience that inevitably arises with the study” (p. 1). They indicated, “the history of field notes has not been written,” (p. 6) and that modern field scientists “still balance this compositional tension” based on “goals and disciplines” by way of a “diary, journal, data, and catalogs” (p. 11). They indicated record keeping “is at the heart of good science,” which is “true for field scientists and naturalists” and that much is made known through field notes (p. 1). The guidance is limited; however, “notable nineteenth-and twentieth-century scientists” provided insight through writings (p. 2). I wrote notes to portray responses to questions asked (Pauk & Owens, 2011). I used The Cornell System for Note Taking Method to cite information, which illustrates the way to take, record, reduce, and review notes (Lee et al., 2015).

Pilot Study

There are times when a pilot study is conducted to test a process, an instrument, or method to determine the feasibility of a study. Such studies are used to identify what

will or will not be effective to solve a research problem (Leedy & Ormrod, 2005). Pilot studies are used when testing instruments, designing a protocol, determining the effectiveness of a sample size, identifying likely problems, deciding resources, and detecting problems with data analysis. They do not guarantee success, but are crucial to the study design. They may uncover problems that affect the process of research or provide notice of a potential, failed project (van Teijlingen & Hundley, 2001).

Researchers might conduct a study interview with a friend, colleague, or someone who qualifies to participate to gain insight into questions to ask or on how to prioritize questions (Merriam, 2009). These interviews help to identify words that might be confusing and to recognize questions that yield unneeded data. Yin (2012) indicated that testing ensures the collection of data is targeted and will work.

A pilot study was conducted on the interview instrument to eliminate confusion. To conduct the pilot, I invited three work-related colleagues to participate. Their selections were based on work knowledge and work field. One participant (Participant 1) has community-based experience, another (Participant 2) has international and community-based experience, and the other participant (Participant 3) has experience working with veterans. I discussed what the pilot study would entail and their involvement in the process. I informed them there was no pressure to participate.

Each pilot participant signed a consent form (Appendix G). We agreed on a day, time, and place convenient to meet. The interviews were held in Upper Marlboro, Maryland. I interviewed the pilot study participants separately for approximately 45-minutes to 1-hour in a public setting. The open environment allowed for a comfortable, non-threatening atmosphere. The participants appeared relaxed and comfortable. At

each session, I shared the purpose of the interview, informed them that participation was voluntary and that they could stop involvement at any time.

I asked questions and the participants responded. At the end of the interview, we discussed the instrument to find out if the questions were clear, easy to understand, or if there was a need to modify the instrument. The participants made recommendations and I modified the instrument accordingly. The results of the pilot study are outlined in Chapter 4.

Procedures for Recruitment, Participation, and Data Collection

The Director of Prince George's County Department of Social Services allowed 2-weeks beginning the end of August 2013 to collect data. The site location was the Administration Building of the Department of Social Services, Landover, Maryland. Prince George's County Department of Social Services partners with the community, customers, and providers to offer information and services to protect children, and vulnerable adults.

There are 863,420 people in Prince George's County, Maryland (Factfinder, n.d.). The poverty level in Maryland is 9.8%. In Landover, Maryland, it is 16.7% (Factfinder, n.d.). I used guidelines for interviews, as suggested by Gay and Airasian (2000). Gay and Airasian suggested to listen and follow up with participants when responses are not understood, "ask open-ended questions," and not to interrupt what is being said when the participant is speaking (p. 223). They further commented about staying engaged with participants on questions and to ask for time to allow for silence.

After spending time in the field and developing familiarity with the setting, I conducted interviews. As Singleton and Straits (2005) mentioned, interviews progress

“from questions about concrete situations” to the participants’ “experience and interpretation of events” (p. 320). A number beginning with 770 was assigned to each participant at the start of the interview for confidentiality purposes. I placed the participant’s name and title on the first page of each note sheet. I interviewed a maximum of four participants in one day. There were times when I did not interview any participants. That way, I had time to collect my thoughts, revisit my notes, and ample time to check with participants for clarification of what was provided. Interviews were face-to-face or by telephone and lasted 45 minutes to 1 hour. The order of the questions allowed for in-depth responses of experiences, thoughts, concerns, feelings, and interest. Information was then transcribed in the field, verified, coded to capture concepts, themes, and events. Participants had an opportunity to check their transcript. Data were stored on a personal computer where only I have access.

Observations allow the researcher to obtain data in real-time about participants’ behavior and experiences in the actual setting (Picardi & Masick, 2014). Picardi and Masick (2014) indicated that observation is “perhaps the most basic of all nonexperimental methods” (p. 132). Its goal is to “develop a comprehensive picture of a specific area or phenomenon” through the collection of data and notes within a specific time (p. 132). Observations can provide “direct and generally unequivocal evidence of overt behavior, but it also is used to measure subjective experiences” of participants (Singleton & Straits, 2005, p. 84).

When visiting the field, there was an opportunity for direct observations of participants with colleagues, in offices, and workspaces. Direct observations included the climate of the organization, furnishings, and the condition of the building (Yin, 1994).

For example, there was a quietness in the build. People were not walking around nor did they congregate in the lobby area or near the interview rooms. The furnishings were business appropriate with chairs, a countertop with material, and a lunch area that had kitchen appliances. The condition of the building did not show signs of deterioration. Yin (1994) mentioned that observational evidence is helpful in that it provides information that is invaluable to understanding the phenomenon. Furthermore, it is an opportunity to meet with individuals without scheduling an appointment. Having met with participants at their worksite allowed a real-life experience as an insider.

Creswell (1998) mentioned that leaving from the research site should include thanking participants, sharing plans to use the data, and providing ways to access the study. I communicated to the participants my intention to conduct the study at their organization and to explore how learning transferred after employees attended training. I thanked the participants for working with me and mentioned they would receive a copy of the dissertation summary once finalized. I also told the participants that as a token of appreciation, they would receive a book from a selection of three.

Data Analysis Plan

Prior to the data analysis plan, I aligned the interview questions with the research questions by relevance (Appendix H). For example, Interview Questions 1 through 5 pertained to Research Question 1: How do managers, training specialists, and human resource development specialists familiarize employees with learning transfer expectations? Interview Questions 6 through 8 pertained to Research Question 1a: What factors or conditions address the learning transfer function or activity? Interview Questions 9 through 11 pertained to Research Question 1b: In the event there is not a

learning transfer initiative or instructions, how do employees integrate what was acquired in training to the organization? Interview Questions 12 through 14 pertained to Research Question 2: How do managers, training specialists, and human resource development specialists use learning acquired from employees who attend training?

Next, I used a six-step process to analyze the data. The process consisted of organizing and preparing for the analysis, reading the data, detailing the analysis with a process to code, coding the data to obtain descriptions, determining how to present a description of the themes, and presenting an interpretation of the data (Creswell, 2009). Using Microsoft Excel, I created a spreadsheet placing each interview question as the heading followed by a subheading that included the participant's code (e.g., A, B, or C), PIN, and response to the questions to examine data. The data were then outlined in a categorical aggregation in hopes "that issue-related meanings" would become obvious (Creswell, 1998, p. 154). I read and re-read the issues looking for duplications. After narrowing and eliminating duplications, I assigned a code. I then organized the data codes to obtain descriptions. As Bazeley (2013) put it, coding is a way to locate the evidence. To reveal proficiency at coding, I maintained a "responsiveness to data" (p. 125) where my attention was on the purpose, seeking an understanding of the observations and encounters with participants. Saldona (2013) asserted that coding is the first step toward rigorous analysis. It involves synthesizing data in a coherent manner (Harris, 2010). Codes were abbreviated in phrases to capture salient points (Saldona, 2013). The codes were then used to determine meaning. Main points were identified while minimizing judgment.

The descriptions were then phrased into concepts (Appendix I) and then themes (Appendix J). Saldona (2013) mentioned that themes are outcomes of coding the categorized data or the reflection of the analysis. The process takes individual parts and provides meaning (Stake, 1995). To facilitate a transition from themes, Bazeley (2013) suggested describing, comparing and relating. In describing the data, I examined the study's background and each theme, its character, and the way participants shared information. Next, I compared differences and voices (i.e., word usage, descriptions, length of sentences, pauses). Onwuegbuzie and Leech (2007) suggested comparing voices of cases by subgroups. To compare voices of cases by subgroups, I grouped the cases into two subgroups where each subgroup represented a case. I compared one case from each subgroup with another to prevent assuming information. This approach is important to qualitative research in that it allows for the uniqueness of data. I then related themes, watching for patterns and associations to become more familiar with captured data. After which, I documented data using Microsoft Excel, drawing conclusions on implications from the case (Leedy & Ormrod, 2005).

Issues of Trustworthiness

There was adherence to trust and ethical considerations for this research study. Ethical requirements were followed according to Walden University's policies and requirements that related to research studies.

Credibility. Triangulation was used as a strategy to promote quality (Flick, 2007). Khan (2014) indicated that an approach to research is use of triangulation where more than two methods are used to resolve a problem. There was prolong time in the field to observe participants, their setting, and reactions with colleagues and clients. Through in-depth

interviews, questions were asked and transcripts were created and given to participants to examine accuracy, which validated responses. Notes were taken and experiences were recorded. Jick (1979) commented that triangulation increases confidence in data, allowing for diverse ways to understand the phenomenon while providing clarity.

Transferability. Participants were selected because of their “unique properties” of occupational title and a set of criteria that support their skill and knowledge to participate in a face-to-face interview to answer questions about training (Guest, Namey, & Mitchell, 2013, p. 14). The participants provided rich-thick descriptions of information. Merriam (2016) stated, “Rich, thick description facilitates transferability” and that what is learned in a specific situation can “transfer or generalize to similar situations” (pp. 265, 255).

Dependability. Merriam (2016) asserted that research is concerned with knowledge that is reliable and “being able to trust research results is important” because researchers intervene in the lives of others (p. 237). To ensure reliability, it is paramount to conduct research in an ethical way where attention to detail is given to the description of the research, collection of data, the manner in which the data are analyzed and interpreted and how the findings are outlined. Using a qualitative case study method, I abided by ethical standards. I conducted the research study where I provided a depiction of the phenomenon in much detail and a conclusion in alignment with questions asked, data provided and interpreted.

Confirmability. My integration of reflexivity consisted of reflecting, evaluating critically, and making a change based on consciousness (Dunk-West, 2013). I considered the needs of people suffering from lack of resources, the inability to survive successfully, and the role social service employees play to assist. Data from the in-depth interviews with

participants made me aware that the role of the social service employee is complicated, never ending, and ever-changing. Evaluating what I heard and observed, I realized that to make for a more efficiently run social service organization, all employees need to work together consistently and relentlessly.

Ethical Procedures. Walden University's Institutional Review Board granted approval for me to conduct research and the Director, Prince George's County, Department of Social Services, granted me permission to conduct research study. Participants of the study were notified through an Inform Consent that participation in the study was voluntary, that they could decide not to participate at any time. The participants were informed, through the consent, that risks were minimal and no more than experienced in a normal, professional setting.

Moreover, I completed a training course titled "Protecting Human Research Participants at the National Institutes of Health, Office of Extramural Research, April 14, 2010. Walden University Institutional Review Board, signed by the Associate Director, Office of Research Ethics and Compliance, granted approval to conduct research. I received a Letter of Permission to Conduct Study dated August 5, 2013. This letter was signed by the Director, Prince George's County, Department of Social Services. In the letter, the director gave me permission to conduct interview sessions. She indicated that individual participation would be voluntary at the discretion of staff. The director allowed me to have an area to solicit employees to participate and requested a copy of the research product. Contact with participants was made via a letter to convey interest. The letter stated the participant's role was to answer questions regarding learning transfer. It mentioned participating consisted of adding information to the body of knowledge to

further an understanding of learning transfer in a social service organization, a book of choice, and a summary of this dissertation.

Summary

After comparing different methods, a qualitative case study method was selected. It provides an opportunity to learn about something that is not clearly understood. Grounded theory aims to develop theory. Ethnographic study considers norms, culture, and predictability. My interest was to focus on a real-life situation in a natural setting where I could take a complex situation and examine it objectively. Although with research there is a possibility for bias, attempts were made to minimize it. A pilot study was conducted of the interview instrument to assist with clarification, especially with wording, organization, and areas unknown to the researcher. Procedures were followed to recruit participants and a six-step process outlined the way to analyze the data. When it came to issues of trustworthiness, policies and requirements were followed. Chapter 4 explains the results. It begins with highlights of the pilot study of the instrument, the research setting, demographics, data collection, data analysis, and evidence of trustworthiness. It then goes into details about the study results and ends with a summary.

Chapter 4: Results

Common concerns of social service organizations are that training is limited, there are numerous changes to the field, and the occupational image is associated with household chores for the young and elderly. The purpose of this study was to explore how employees of a social service organization transferred learning after receiving training. It examines participant's assumptions, reasoning, and opinions considered factual (Rubin & Rubin, 2012). The study drew from the field of management, incorporating ideas and opinions methods using a qualitative case study approach to provide results. The research for the study took place in a natural setting where individuals were employed in a social service organization. The participants provided personal accounts of experiences.

The Department of Social Services, Landover, Maryland provided the data. The research questions focused on learning transfer expectations, factors or conditions that addressed learning transfer, learning transfer initiative or instructions, and the use of learning acquired from employees who attended training. This chapter covers the pilot study, research setting, and demographics. It continues with data collection, data analysis and evidence of trustworthiness. It continues with the results outlined by settings, observational field notes, and responses to research questions. Data from two comparisons are also provided. The chapter ends with a summary and a preview of Chapter 5.

Pilot Study

Nine of the 14 interview questions were revised for clarity: questions 1, 4, 5, 6, 8, 9, 12, 13, and 14. After revising the instrument, the participants again reviewed the

instrument and commented that in their opinion, it would yield insightful responses. They further mentioned that the instrument possessed a logical, sequential flow (Appendix K). Three individuals participated in the pilot with different experiences. The participant with community-based experience (Participant 1) indicated employees informed him of their training needs and stated, “industry needs and money” determine the approval of training. He commented that when speaking with employees about training, their qualifications are highly considered. Each year he runs a pre-approval training program where training alignment is made after meeting with stakeholders. One of his responsibilities is to attend an annual conference with stakeholders. To ensure learning transfer, employees partner with skilled craft people who assess their weekly performance and provide a report. The employees are then rotated to other partners for specific learning applications. According to him, compliance requirements govern the organization.

The participant with managerial experience indicated that he would not allow employees to attend training unless it advanced the mission of the organization. He made it clear that he “wanted a staff that was well-trained” (Participant 2). He had a training budget and would send out memorandums to notify staff to attend training. He issued notices and made templates. His team had regular weekly meetings to discuss training. When employees went to training sessions, they became the expert in the area trained. He commented that it was important to utilize the training dollars properly. He created a homeless person physician program, a nursing network, and an advisory group. According to him, there was not a written protocol on training, but a memorandum that served as training guidance.

The participant with experience working with veterans (Participant 3) had employees attend training of interest. However, before leaving for training, the employees had to sign a contract of agreement. He did not visit with stakeholders. Instead, he sent out notices that indicated training requirements. He indicated that consultants reviewed training notices and stakeholders were informed. In his organization, a board determined who would attend training sessions. Throughout the year, interactions ensued between employees and the consultants. The stakeholders stayed in touch with the employees about training.

Research Setting

Concerning families in households below the poverty level with children under 18, the U. S. Census Bureau (2013) reported 18.7%. It was estimated that 36.1% received Supplemental Security Income or public assistance. When examining the earnings, the median income reported \$32,457. In demographic and housing estimates, the median reported 31.2 years of age. According to the U.S. Census Bureau (2009), there was a veteran population of 1,222 with 0.7% having served in World War II; 8.9% in the Korean War; 34.5% during the Vietnam era; 15.5% in the Gulf War from 1990 to 2001, and 12.7% in the Gulf War 2001 or later.

On September 12, 2013, from 12:00 p.m. to 1:00 p.m., I provided an overview of my proposal to employees of the Department of Social Services, Child, Adult and Family Services. I mentioned I would provide a book of choice from a selection of three as a token of appreciation. Approximately 25 employees attended. Some of the employees worked in the main building, others worked in adjacent buildings. Participation was voluntary, and there was no risk of harm. I assured those in the audience that if they

participated, their personal information would remain confidential. Several individuals had questions. Their questions pertained to job title and rationale for selection of the books.

At the overview, I distributed a three-page document (Appendix L). The first page had two sections. The first section asked for a name, e-mail address, work telephone number, and a book of choice. The second section asked that they tear off the lower section and to keep it for his or her records. This lower section included my name, e-mail address, and telephone number. The second and third pages of the document included information about the three books of choice: *Rework*, *Switch*, and the *Happiness Project*. A calendar of September and October was also given to each participant to consider a day to be interviewed.

Fifteen employees signed- up to participate. After they participated in the study, I took the books of choice to the organization for distribution. I also included a book for one individual who did not participate, but completed the form to receive a book.

Demographics

All the participants were women and either African American, Caucasian, or Hispanic. Five participants self-identified as managers, three as training specialists, and six as HRD specialists. There were 15 original participants; however, one individual indicated she no longer wanted to take part in the research study. Female and male employees of the organization attended the September 12, 2013, overview. None of the males signed-up to participate. It is unclear if the male attendees did not meet the criteria to participate. Galley and Parrish (2014) indicated that for social work training at the

undergraduate and postgraduate levels, “males remain a small minority of social work students” (p. 1) and “75% of qualified social workers in England are female” (p. 1).

Galley and Parrish (2014) indicated that the reason for the gender imbalance is complex and that while the requirements for entering the field are increasing, “male students’ academic results appear to be decreasing” (p. 1). Monetary reward and professional status are not the only factors relevant to male graduates. Carey (2011) mentioned that the “reasons for the shift are economic as well as cultural” (p. 2). He mentioned that in the 1990s, therapists’ income dwindled. The field of psychiatry, once “male-dominated,” began to focus more on “drug treatments” and as women entered the workforce in large numbers, they used the method of talking to assist with problems. When this happened, men left the field and women replaced them. Carey commented that men are guided differently from women when a child. He continued indicating that a males’ viewpoint was lost when attention was given to empowering women. Carey also mentioned that perception played a part. For example, some men may think “only another man can help them,” especially when it comes to topics of aggression and sex.

Data Collection

Interviewers have three options to collect data: take notes when interviewing, write notes after interviewing, and tape recording the interview (Gay & Airasian, 2000). By taking notes while interviewing and writing notes after the interviews, I collected data. Gay and Airasian (2000) stated, “A few participants may balk at the use of a tape recorder during the interview” (p. 222). At the time of the first interview with Participant 770, I was told not to tape record the session. I, therefore, did not tape record the session.

Because I wanted to have consistency throughout the data collection process, I did not use a tape recorder for subsequent sessions.

The interviews took 45 minutes to 1-hour to complete. For each interview, I had a manila folder to collect data. On the tab of each folder, I wrote the participant's Personal Identification Number (PIN). Leedy and Ormrod (2005) mentioned that a popular approach to maintain confidentiality of participants is to assign a fake identity. My approach was to use numbers instead of names for confidentiality. Therefore, participants received a PIN to protect identity.

September 12, 2013 to October 21, 2013 were days scheduled to conduct interviews. I gathered evidence from multiple cases to obtain experiences and perceptions of learning transfer. One interview took place in the participant's office. Two interviews were completed in the lunchroom, and 10 interviews occurred in an interview room. The final interview ensued over the telephone. The order of interview questions was predetermined. After all interviews, I e-mailed each participant and attached a copy of their transcript for review. I wrote that I would respond immediately and that if they agreed with the information, nothing was required. I mentioned it was a pleasure to work with them and I thanked them. I made known that as a token of appreciation, their book of choice would arrive shortly. I further indicated that after finalizing my dissertation, they would receive a copy of the summary. The participants had from October 14, 2013, to October 21, 2013, to verify the accuracy of captured data and to provide comments, and corrections. I included that I was available to discuss captured data.

Data gathered included past occurrences, plans to move forward, and current practices. While interviewing, participants went back to a previous question to respond. At other times, information was an iteration of previous responses. Several participants emphasized the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and the Maryland Children's Electronic Social Services Information Exchange System. The participants offered two recommendations for the future: include technology and instructions on usage and terminology where employees are familiar with the definitions.

Data Analysis

Leedy and Ormrod (2005) indicated that data analysis involves the assemblage of information about the study, categorization of data, interpretation, "identification of patterns," and "synthesis and generalizations" (p. 136). After collecting the data, it had to be arranged and classified. Gay and Airasian (2000) mentioned comparing the concepts. I read and re-read the data, looking over "field notes, transcripts," and considering observations to get an understanding (p. 241). I looked for "convergence of the data," highlighting information, writing notes in the margins of the transcripts, and circling data to revisit (Leedy & Ormrod, 2005, p. 136). I then searched for concepts, commonalities, duplicates, and patterns (Onwuegbuzie & Leech, 2007).

Data Managing

Data managing is an approach used to organize and check for completeness. It is a way to place data in an order "that will facilitate analysis" (Gay & Airasian, 2000, p. 241). I wrote descriptions of data collected and put similarities together. I ranked and coded the data "into smaller units, determining the import of these units" and placed them for interpretation (p. 242). I then chose categories to make sense out of the collected data.

As Gay and Airasian (2000) stated, “Without data that are classified, there is no feasible way to analyze” qualitative data (p. 243).

Looking at familiarization of learning transfer, the patterns and issues were: relevance to the job, the employee determined who approved training requests, and employees reviewed training sessions offered. The overriding theme became *Expectations for Learning*. Examining factors or conditions that addressed the learning transfer function or activity, the patterns and issues were talking, sharing, and reviewing. The overriding theme became *Involvement with Others*. An examination of initiative or instructions to integrate what was acquired in training, nothing was integrated but handouts were given and referrals were made. The overriding theme became *Information Integration*. Examining the way managers, training specialists, and HRD specialists used learning from employees who attended training, patterns and issues were informal, telephone, when needed, do not, and monthly CQI Meetings. The overriding theme became *Consistent Collaboration*.

Categorization of Data

Categories “provide the basis for structuring analysis and interpretation (Gay & Airasian, 2000, p. 243). Microsoft Excel was used to code the data. I headed the spreadsheet by interview question. The spreadsheet contained three columns: the first column identified title designations by code (A for the manager, B for training specialist, and C for HRD specialist), the second column included PINs starting with 770. The third column included data provided by participants at the time of interview. The participants explained that they used many ways to approve training. However, there was not a standard or universally known way that determined the approval of training. One

participant mentioned relevance to the job, another indicated money. Other participants mentioned who approved training, what training was based on, when training was taken, the conditions an employee can take training, and when training is not approved.

When it came to familiarizing employees with learning transfer expectations, the participants indicated sharing information, having an expectation of what the employee should do, or nothing. One manager (Participant 783) stated, “Employees debrief me on what was learned in training. This information is then applied to assist the employee.”

When explaining how employees prepared for training, the participants mentioned knowing what the employees needed, thinking of questions to ask the training facilitator, making sure there was office coverage, reviewing training descriptions, or nothing was done.

Employees did not have a specific time to meet to discuss training, but a manager indicated meetings took place “the first and third of each month.” A training specialist mentioned that meetings were held when “It is time for performance appraisal reviews.” Others indicated as needed, there was not a set time, or not at all. According to the HRD specialists, they did not meet with the employees or they met when needed. To align training with the mission of the organization, participants indicated they thought about what to do or they took training. A manager indicated having someone to come in and talk with the employees. The training specialists mentioned viewing available training sessions. An HRD specialist stated she was “Not familiar with the mission statement of the organization” (Participant 773). Another HRD specialist (Participant 774) stated, “all of the training is aligned to the mission.”

When interacting with colleagues and stakeholders, it was conducted by talking with colleagues, making suggestions, and asking if employees would like a copy of information received in training. Most did not talk with stakeholders. A manager mentioned having informal conversations with colleagues but not with stakeholders. A training specialist stated, “Sometimes colleagues and I may get together and pay for training that might be helpful” (Participant 779). Another training specialist stated, “Interactions with stakeholders to address training needs are not held at my level.” An HRD commented that informal conversations were held. For example, a manager stated, “Ad hoc; as needed” (Participant 775). A training specialist indicated it does not happen. An HRD specialist stated, “Sometimes quarterly, other times as needed” (Participant 780).

The responses on how often meetings happened with colleagues and stakeholders varied from not meeting to once a year, quarterly, every two months, ongoing, and as needed. To determine training opportunities, the participants reviewed job e-mail notices. They also went to the Maryland Children Electronic Social Services Information Exchange System, the University of Maryland School of Social Work, and the Reid Institute. Sometimes training opportunities were determined by word of mouth. One manager stated that training opportunities were determined by considering “new requirements to align strategically with training” (Participant 783). A training specialist commented that the same mandatory training is held. And HRD specialist mentioned that training determinations are not made by them.

Participants did not meet to discuss written guidance with employees. They indicated there was not a policy to do so nor was there anything in writing. A manager

stated, “Going forward, we will have standard operating procedures in place” (Participant 770). A training specialist stated, “We really do not get together after training” (Participant 779). One HRD specialist made a comment that if you are not self-motivated, you will struggle. When discussing things employees shared, the participants mentioned ways to prepare for the Continuous Quality Improvement (CQI) Meetings, suggestions, preparation of the training facilitator, information relevant to cases, perspectives on the training, and techniques learned. When responding to the practice to process information, a manager mentioned having standard operating procedures but did not provide a description or details. A training specialist indicated there is “nothing in place.” An HRD specialist stated, “Training is more for individual knowledge. The individual determines what to do with the training.”

The participants indicated how they shared information with colleagues obtained from employees who attended training. The managers, training specialists, and HRD specialists shared information informally with colleagues or as needed. A manager, Participant 783, stated, they looked “for broad implications and share the learning with my counterpart” to integrate into the organization. A training specialist commented that information obtained from employees is shared with colleagues informally. Several of the HRD specialists indicated handouts and telephone numbers. The participants met with colleagues to collaborate on training issues as needed or not at all. However, a manager (Participant 783) mentioned meeting “Twice a year, but not in a formal meeting.” A training specialist indicated meetings took place “At least once a quarter or four times a year” (Participant 778). The HRD specialists did not meet with colleagues to collaborate on training issues. However, one HRD specialist stated, “In some form on a daily basis”

(Participant 781). When it came to meetings with stakeholders to collaborate on training based on societal needs, again the responses varied. Several of the participants reported meeting with stakeholders as needed or not at all. A manager (Participant 770) and two HRD specialists (Participants 777 and 781) indicated meeting with stakeholders monthly. Another manager (Participant 776) commented that at her level, she does not meet with stakeholders. A training specialist stated, "There is nothing in place" (Participant 771). Two HRD specialists (Participants 772 and 780) commented that because they are not administrators, meetings do not take place with stakeholders and the supervisor meets with stakeholders.

Evidence of Trustworthiness

Credibility. An adjustment was made to the collection of data in two areas. First, the collection was to tape record, interview participants face-to-face, observe, and take notes. Because the first participant did not want me to use a tape recorder, I did not use a tape recorder with other participants. Second, participants were to participate in a face-to-face interview for 45-minutes to one hour. One participant was not available for a face-to-face interview. Therefore, the interview with that participant was held over the telephone for approximately 45-minutes to one hour.

Transferability. In my letter to the potential site official, I made a request for 15 employees who were managers, training specialists, and HD specialists. The request indicated the criteria, confidentiality, and risks. The Director of Social Service granted permission to conduct research, stating the organization's responsibility of providing an area to solicit staff to participate and making space available to conduct interviews.

Dependability. There were no changes in this area. A training course titled, “Protecting Human Research Participants,” was completed and requirements were abided.

Confirmability. There were no changes or adjustments.

Study Results

The results are organized by physical setting where observations are made of the security officer, receptionist, material available to the public, people entering the research site, and the research site. It includes data obtained by a telephone setting. It gives an account of observational field notes. Responses are provided of the research questions followed by title comparison and subgroup comparison.

Physical Setting. A security officer was stationed near the receptionist and was attentive to persons entering the building. At times, a social service official an official used a loudspeaker to provide information. I could not see this person, I could only hear his voice. The receptionist appeared to set the stage for the environment. She was keen on details and assertively cared for the needs of individuals entering the building and others in the waiting room. There was neatly compiled literature, chairs, a play area for children, and available restrooms. There was a television in the lobby, which turned out to be a major medium because it aired when a gunman opened fire at the Washington DC Navy Yard killing 12 people and wounding many. The television provided continuous, up-to-date happenings of the event (Shear & Schmidt, 2013).

People entered the building at various times. The receptionist advised individuals to take a seat. She called employees by telephone informing them of visitors. The employee would then appear and escort the visitor to an interview room where the door closed. Interviews occurred in a participant’s office and the lunchroom; however, most

were held in an interview room with a desk, chairs, telephone, and a door to open and close. When interviewing the participant in her office, the office was neat and files and papers were organized. There was a telephone, items on a bookcase, and a door. The participant was welcoming. She sat behind the desk and I sat in a chair in front of her desk. Lunchroom interviews were spacious and without interruption from others entering, leaving, using the microwave, refrigerator, or sink. Most of the interviews were held in an interview room. The room was conducive to conducting business with needed chairs, desk, telephone, and door. The building had two floors and ample parking.

Data by Telephone Setting. Participant 783 was the only person interviewed by the telephone. The telephone interview had more of a professional tone. Like the other interviews, the conversation flowed smoothly. However, when comparing the face-to-face sessions with the telephone session, the latter interview did not allow for an opportunity to have eye contact. When examining participant 783's response to the way managers, training specialists, and HRD specialists familiarized employees with learning transfer expectations, she indicated that the supervisor determined training approval. The employee debriefed the supervisor on what was learned in training. This information was then used to assist the employee in job application. Participant 783 further commented that when it came to preparing employees for training, nothing was done. However, she asserted spending time to examine how the employee went about reaching the job expectation. Participant 783 indicated that when in training, employees are to focus on training and not the job. Participant 783 met with employees on an ongoing basis in an informal manner. Training alignment occurred when linking training with the current job or the next intended career level.

The factors or conditions that addressed the learning transfer function were to budget for training. According to her, colleagues discussed training they had attended. Participant 783 mentioned grooming employees for the next level as an ongoing effort and considering the agency's mission, vision, and goals when determining training opportunities. Participant 783 assessed employees' skill-set and to consider new requirements.

When it came to written guidance, Participant 783 discussed administrative and personnel procedures for appropriate training. Employees shared what they realized and understood. Participant 783 indicated the employees wanted the department to succeed and that they practiced what was learned. Participant 783 indicated that the practice revealed if the training had been integrated into the job.

When it came to how learning from employees who attended training was used, Participant 783 indicated that she looked for broad implications and shared learning with counterparts. Participant 783 met with colleagues to collaborate on training issues twice a year in informal meetings. When it came to meetings with stakeholders about training based on societal needs, she indicated it happened quarterly "about internal needs."

Observational Field Notes. Observations entail considering a setting in diverse ways. Merriam (2009) identified six recommendations for field notes: physical setting, participants, activities, conversations, informal and unplanned activities or symbolic meaning, and the researcher's behavior. I made observations regarding the receptionist, security officer, literature placed in the environment, people in the environment, and reactions in the environment during the time of an attack at the Washington, DC Navy Yard, and the environment. The activities of the research site in the lobby area were

minimal and the pace was slow. Conversations were a whisper yet appeared formal. There was material on a stand and on a countertop near the security officer and receptionist area that included primary adult care, Prince George's County Click 311, Affordable Care Act for residents of Montgomery and Prince George's counties, and nutrition for economically disadvantage Prince George's County Residents. Additionally, there was a flyer titled Prince George's County Department of Social Services that mentioned covered Medicare, qualified Medicare beneficiary, emergency assistance to families with children, Foster Care, child protective services, and adult protective services.

Symbolic fixtures were not apparent. I had a professional demeanor. My attire was business, appropriate for meetings with officials and interviews with participants. The behavior of the receptionist was welcoming and helpful. She answered questions and was proficient with scheduling and notifying participants of upcoming interviews. The security officer focused on communications held by the receptionist and the actions in the lobby. There were limited numbers of people in the environment. Most were employees, the others were individuals coming in the building for assistance. There was a middle-aged couple and a younger couple with an infant child. The middle-aged couple talked at length with the receptionist. The receptionist made a call and an employee came to speak with the couple. Another employee came to talk with the younger couple. This couple went with the employee to an interview room. The door was closed however, their voices were heard through the wall. Reactions in the environment during the time of an attack at the Washington DC Navy Yard appeared busier. Those of us in the lobby frequently viewed the television for updated news. The atmosphere in the environment was calm, I

could not tell about the area where the employees had offices. That area was in a different location, closed off from the interview rooms and the lobby.

Responses to Research Questions

***Research Question 1.** How do managers, training specialists, and human resource development specialists familiarize employees with learning transfer expectations?*

The managers focused on the job. For example, Participant 770 indicated “relevance to the employee’s function.” Participant 775 commented, the “employee’s work” needed to be “up-to-date” and if it is not, “training is not approved.” Participant 783 mentioned that training must reveal “relevancy to the employee’s job.” Participant 782 stated the “employees decide the training to take” and that she finds out “after they have made their decision.”

When it came to the training specialists, Participant 771 indicated, “Employees must submit a request to attend training.” Participant 778 stated, “You pre-register, put the training on the supervisor’s calendar and hope nothing happens.” The HRD specialists made other points. Participant 772 mentioned when “training is free, it is easier to obtain” approval. Participant 780 asserted that training approval is dependent on “what was going on with cases.”

When asked about learning transfer expectations, a manager, Participant 775, stated, “When employees obtain the benefit from state training, they are to share the knowledge.” Other managers commented that they share information at the unit meeting. Participant 782 stated, “Nothing is in place,” but that plans are underway to “do something in the future.” The training specialists asserted that there is no formal process

to familiarize employees with learning transfer. They mentioned that they share referrals, handouts, and brochures, or they take initiative to discuss the matter with their supervisor and colleagues. The HRD specialists mentioned they inform employees about learning transfer expectations through one-on-one sessions. However, Participant 773 stated, “There is no mechanism to harmonize learning transfer to provide feedback.”

When preparing employees to attend training, the managers indicated several ways. Participant 770 commented she is familiar with her staffs’ capabilities and by knowing this, she provides “training that will help them.” The person continued by mentioning performance evaluations are reviewed and a curriculum is developed. Participant 775 mentioned that employees are told: “to be on time, dress appropriately, and be professional.”

The training specialists mentioned coming up with questions to ask facilitators, reading training descriptions, and checking employees’ calendars to determine conflicts. Participant 771 stated, I “think of questions.” Participant 779 expresses reviewing training topics and considering the logistics. The HRD specialists indicated they review notes to identify questions to ask facilitators. Participant 773 stated, she “thinks about questions to ask to maximize learning.” Participant 777 mentioned reading the description and objectives of the training. Participant 780 mentioned having the interest to do more research on requested training, topics, and to learn more about the “facilitator’s perspective.”

In terms of how often meetings took place to discuss training, a manager (Participant 770) pointed out meeting “the first and third of each month on various topics.” Another manager (Participant 775) stated, “During the months of November and

December – there are lunch sessions on special events.” Participant 776 mentioned when needed. Participant 783 stated, “It is ongoing.” The training specialists indicated that there was not a set time to meet with employees and Participant 778 asserted, not “until it is time for a performance review.” The HRD specialists provided other information. For example, Participant 773 revealed that meetings are “stagnant” and that when they meet, “only a couple of voices are invited to share opinions or points of view.” Participant 774 mentioned not meeting at all.

To align training with the mission of the organization, managers commented that they offer mandatory training or arrange speakers to visit the organization to share information. More specifically, Participant 770 stated, “we do whatever we can to enhance the quality of life for the family.” Participant 782 indicated encouraging training “to strengthen skills to be the best.” The training specialists asserted they view available opportunities and have employees attend mandatory training. Participant 771 stated, employees “can take any training on child welfare, which is part of the mission of the agency.”

The views of the HRD specialists were that aligning training with the organization’s mission is “a big job” and that it “gave me hope that there could be change” (Participant 772). She continued by mentioning finding herself “an advocate for a therapist.” Participant 773 indicated not being familiar with the organization’s statement and that if one was available, “it was not visible.” Participant 774 mentioned that before a person is hired, he or she must “take competency module training.” Participant 774 mentioned “all of the training is aligned with the mission of the organization.”

Research Question 1a. What factors or conditions address the learning transfer function or activity?

The managers mentioned several factors addressed the learning transfer function. For example, Participant 770 mentioned familiarizing self with the work of colleagues, networking, and sharing training information. Participant 775 asserted going out into the community. She described it as a “give and take exchange.” Participant 782 had informal conversations with colleagues, but did not interact with stakeholders. Participant 783 stated, “I believe in mentoring and grooming employees for their next job.” According to the training specialists, they met with colleagues as needed; some did not meet with stakeholders. Several training specialists indicated that interacting with stakeholders did not happen at their level. Participant 779 did not elaborate on meetings with stakeholders, but rather stated colleagues may “get together and pay for training that might be helpful.” Another training specialist spoke about what happened in the past. For example, she mentioned fairs that once occurred to address training needs. The HRD specialists did not elaborate on discussions with stakeholders. One HRD specialist, Participant 774, stated, “For stakeholders, I explore what is needed and share the information with my supervisor.” Another HRD specialist, Participant 780, commented that information “goes through my supervisor who is very supportive.”

When engaged with colleagues and stakeholders to address training, managers met as needed or, at least, once a year. However, Participant 783 stated engagements were “ongoing.” When it came to the training specialists, Participant 771 indicated that “with colleagues, it happens as needed. Participant 778 stated, “It does not happen” and Participant 779 commented that it takes place “maybe every two months.” With the

HRD specialists, meetings occurred with colleagues and stakeholders as needed.

Participant 774 stated, “I have to provide a rationale for wanting to share information” and “sometimes the supervisor has to agree to my sharing information.”

To determine training opportunities to offer employees, the managers spoke of matching needs and talking with employees and foster parents. They mentioned that they hear of classes by word-of-mouth and receive training information in the mail.

Participant 776 stated, “We train foster parents quarterly on Saturdays.” Participant 783 indicated she “looks at the agency’s mission, vision, and goals” and “assess and examine skill-set.” At other times, Participant 783 asserted considering “new requirements to align strategically with training.” When it came to the training specialists, Participant 771 mentioned that “officials in the organization do not look for feedback.” Participant 779 commented that she goes online to the University of Maryland School of Social Work and to the Reid Institute, among others, to find out about class offerings. At times, the training specialists viewed the bureau’s mass e-mails for training classes.

The HRD specialists did not make decisions about class sessions. They looked at e-mail notices and went into the Maryland’s Children Electronic Social Services Information Exchange (CHESSIE) System to find offerings. Participant 781 stated, “the supervisor makes sure we register and will send out reminder notices.”

***Research Question 1b.** In the event there is not a learning transfer initiative or instructions, how do employees integrate what was acquired in training to the organization?*

Regarding guidance discussed, one manager, Participant 770, stated, “Going forward we will have standard operating procedures in place.” This participant did not

mention an expected timeline for the establishment of procedures. Participant 776 indicated she did not have a practice in place but mentioned standard operating procedures. This manager commented that “handouts could result in a policy or standard operating procedure.” Participant 783 acknowledged using administrative and personnel procedures but not for all the training.

The training specialists indicated that there were no policies or checklists in place that required employees to meet to talk about guidance. Therefore, they did not meet with employees after training. Participant 779 stated, “We really do not get together after training.” The HRD specialists commented that meetings were not held with employees after training and that written policies were not in place making it a requirement.

When it came to information sharing, a manager, Participant 775, stated, “Employees will share if the training was good, boring, or helpful.” According to Participant 776, employees “will share what they learned in training, its effect on them in terms of perspectives and beliefs.” The training specialists mentioned that employees share handouts, suggestions, and techniques. An HRD specialist, Participant 774, commented that employees share “things relevant to cases” or as Participant 777 asserted, they share “training we feel we need.” Another HRD specialist, Participant 773, indicated that employees inform others of “new knowledge, preparation of the instructor, and if you should attend the training.”

When it came to practices in place to process information gained from employees who attended training, the managers spoke of one day having standard operating procedures. They further commented that there is not a formal policy about processing information from training. Participant 771, a training specialist stated there is “nothing in

place.” Another training specialist, Participant 778, made known that if the information is specific to the job, “it might be discussed monthly at the bureau meeting.” The HRD specialists indicated there was nothing in place. Participant 777 stated, if there are practices, it was “from the Maryland CHESSIE review team.” Participant 781 stated, “after mandatory training, a test is given to gauge understanding.”

***Research Question 2.** How do managers, training specialists, and human resource development specialists use learning acquired from employees who attend training?*

When explaining ways information was shared with colleagues, Participant 770 asserted using a train-the-trainer approach where “someone is known as the go-to person.” Participant 775 commented that information is provided informally at the “supervisor leadership meetings” or on a “case-by-case basis.” Participant 782 mentioned that if “something is written,” a copy is provided. The training specialists mentioned using what they obtained from employees informally. Participant 778 asserted information is shared “by way of providing handouts.” The HRD specialists spoke of using what was obtained from employees who attended training in different formats. For example, Participant 772 stated using information “at the unit meeting.” Participant 781 stated using “telephone numbers and steps to do a specific thing.”

When it came to how often there were meetings with colleagues to collaborate on training issues, managers indicated when there was a need or gave a specific time of the year. Participant 775 mentioned meetings are held quarterly. Participant 783 indicated informally at least two times a year. A training specialist, Participant 778, stated meetings with colleagues took place quarterly. Another training specialist, Participant 779, stated,

“Not much.” An HRD specialist commented that it depended on needs. Another HRD specialist reported “Rarely” do they meet.

When engaging with stakeholders, managers commented that they meet at continuous quality improvement meetings and other times as needed. The training specialists mentioned there was nothing in place that required them to meet with stakeholders. Participant 778 mentioned that meetings do not include training. The HRD specialists mentioned not meeting with stakeholders. Participant 773 commented that stakeholders received training weekly. This participant gave examples of stakeholders as “foster care agencies, Baptist homes, and foster care parents.”

Comparison by Title

Managers. The employees determined the approval of training, or it was based on relevance to the job function, course description, or cost. Regarding learning transfer expectations, employees’ reports were reviewed, employees shared information, or there was a debriefing. Employees prepared for training by being told to be on time, dress appropriately, and to act professionally. Other ways consisted of knowing the employee and the status of the person’s current workload. In some situations, preparation did not happen. Meetings with employees were held monthly, the first and third of each month, as needed, or meetings were ongoing. When it came to aligning training with the mission of the organization, managers commented they could to enhance the quality of life. For training alignment, they arranged speakers to visit the organization.

Managers interacted with colleagues and stakeholders to address training needs by familiarizing “ourselves with each other’s responsibilities” (Participant 770), having professionals to visit the organization to talk about service and training, and having

employees to train other employees. They had informal conversations with colleagues but not stakeholders. Conversations were held as needed. One manager indicated conversations were ongoing. Training opportunities were determined by looking at what was offered, considering the agency's mission, vision, and goals. A manager mentioned discussing personnel procedures with employees for specific training after attending training. Other managers indicated there was no policy to discuss after employee attended training. They did mention that employees shared opinions about the training facilitator, likes and dislikes of the training, and written material received.

In terms of a practice to process information obtained from employees after training, most of the managers mentioned there was nothing in place to process information obtained. When it came to in what way information was shared with colleagues, they indicated when it occurred, it was informal. The managers met with stakeholders to collaborate on training at voluntary Continuous Quality Improvement Meetings, as needed, or meetings were not held with stakeholders.

Training specialists. The supervisors determined the approval of training and training occurred when it was related to the work. There was no formal structure to familiarize employees with learning transfer expectations. Training specialists took initiative and made referrals. Employees prepared for training by reading the training description and objectives, and by determining training logistics. Meetings were held with employees once a month or discussions did not happen. Alignment of training occurred by viewing the availability of training and attending training related to the employee's practice.

The training specialists did not interact with colleagues or stakeholders. If they heard of something of interest, they would share it. If interactions occurred, it happened as needed or maybe every two months. Training opportunities were determined by reviewing online training schedules and by looking through Bloom's catalog. They did not get together with employees after training nor were there formal policies in place to meet. They did, however, share suggestions, handouts, and techniques. There was no practice in place to process information gained from employee training. If training was job specific, they might discuss it at the bureau meetings.

The training specialists shared information with colleagues informally. They met with colleagues to collaborate on training at least once a quarter. There was nothing in place indicating a requirement to meet with stakeholders. As Participant 779 stated, the "Department of Human Resources does this since it is policy driven."

HRD specialists. Money, the supervisor, need, availability of classes and training relevance to the job determined the approval of training. The familiarity of learning transfer happened by visualization and memorization, or there was not a mechanism. Employees prepared for training by thinking about what was needed and informing clients about plans to be away from the office. They did not meet to prepare employees for training. If they did meet, it was at mandatory monthly meetings or twice a month with the supervisor. At times when they met, only a select few individuals were allowed to provide information. There were different opinions about training alignment with the mission of the organization. They mentioned they were not familiar with aligning training, that all training is aligned, or they think about ways to align training with the organization. When interacting with colleagues and stakeholders to address

training needs, colleague made suggestions. They had informal conversations or they had to go through their supervisor. Interactions happened as needed or quarterly. They determined training opportunities to offer employees by reviewing e-mails or going into the Maryland CHESSIE System. They did not meet with employees after training because there is not a policy dictating this as a requirement. They indicated there was not a learning transfer initiative or instructions to integrate what employees acquired in training to the organization. They mentioned learning transfer does not happen. Some of what employees shared after training consisted of if the training was good or not, new knowledge, preparation of the instructor, relevance to cases, and available resources. Regarding a practice to process information gained from employee training, some indicated there was not a practice. If there was a practice, it came from the Maryland CHESSIE Team or the individual would make the determination. They shared information received from employees with colleagues by e-mail or providing handouts. They indicated that information was shared at the unit meeting, individually, or through e-mail. Interactions with colleagues to collaborate on training occurred as needed, rarely, or daily. Meetings took place with stakeholders weekly, monthly, once a month, or by the supervisor.

Subgroup Comparison

Onwuegbuzie and Leech (2007) noted, comparing two participants' responses helps to identify the uniqueness of data. Researchers compare cases to avoid making assumptions that information obtained represents all the cases. I conducted a comparison for the same purpose. It consisted of numbering, shuffling, placing, turning, selecting, and comparing. I wrote the PIN number of each participant on a separate, three by five

index card. I shuffled the cards three times (to separate close association) and placed the cards in two rows. After which, the cards were turned over (to conceal the participant's number). I randomly selected one card from each row and compared responses. The results revealed Participant 776 from Row 1 and Participant 781 from Row 2. The data differed. For example, Participant 776 mentioned that the employee determined approval of training. Participant 781 indicated that if training was mandatory and based on the job, it might be an across-the-agency need. Both participants provided a different response when it came to familiarizing employees with learning transfer expectation. Participant 776 indicated learning transfer happened by sharing information. Participant 781 mentioned learning transfer happened through "visualization and memorization." When preparing employees for training, Participant 776 revealed that workload status reports determined if employees had time to attend training. Participant 781 asserted that the preparation for training was to make sure clients knew employees were out of the office. When attending training, both cases indicated meetings with employees took place when needed. Considering the alignment of training with the mission of the organization, Participant 776 mentioned that training was congruent with the mission of the organization. Participant 781 emphasized the use of the Maryland CHESSIE System. The participants differed on interactions with colleagues and stakeholders to address training needs. Participant 776 asserted that employees were to train others who joined the organization. Participant 781 remarked that it was not about the interaction with colleagues and stakeholders, but "working with the Maryland CHESSIE System."

Reviewing how often there were interactions with colleagues and stakeholders, Participant 776 commented interactions occurred when needed. Participant 781

mentioned interactions were rare, but occurred. The participants differed on how to determine training opportunities. Participant 776 found out about training informally from colleagues, employees, and others. Participant 781 indicated the supervisor shared information on training received in the mail.

The participants asserted that written guidance was not in place to discuss with employees after training. When examining what employees shared, Participant 776 stated, “employees shared what was learned in training and about how the training affected them.” Participant 781 mentioned that employees shared resources and referrals. Both participants commented that the organization did not have a practice in place to process information obtained from employees after training.

Participant 776 mentioned sharing information informally; Participant 781 remarked the approach used to share information was made by asking questions. When examining how often they met with colleagues on training issues, Participant 776 revealed when needed, and Participant 781 mentioned daily. Based on how often each participant met with stakeholders on training based on societal needs, Participant 776 indicated it did not happen at her level and Participant 781 mentioned monthly. Table 1 is a comparison of both participant’s responses to learning transfer.

Table 1
Comparison of Participants 776 and 781

Approach to Learning Transfer	Same	Different
Approval of Training		•
Familiarizing Employees		•
Preparing Employees		•
Meeting with Employees	•	
Alignment with the Mission		•
Interactions with Colleagues and Stakeholders		•
Interactions (How often)	•	
Determine Opportunities		•

Guidance Discussed	•	
Things Shared		•
Practice in Place	•	
Way Information Shared		•
Collaborate on Training		•
Stakeholders and Societal Needs		•

Summary

The chapter mentioned the concerns of social service organizations. It drew from the field of management with a qualitative case study approach of participants in their natural setting. The chapter mentions the pilot study of the research instrument, those involved, and changes that were recommended. The chapter continued with the research setting, demographics, and data collection. The data analysis section included data managing and the categorization of data. A section on evidence of trustworthiness is also included. The study results provided data from various perspectives, noting inconsistencies of familiarizing employees with learning transfer expectations, differences of factors or conditions that addressed the learning transfer function or activity, not having a learning transfer initiative or instructions, and having an informal way of using what employees acquire from training. A comparison is provided of two cases to reveal similarities and differences.

Chapter 5 is a review of the study. It highlights social service employee responsibilities, ongoing changes in the field, training budget, and the need for managers, training specialists, and HRD specialists to do more. It provides an interpretation of findings, limitations of the study, and recommendations. It makes known social change implications and ends with a conclusion.

Chapter 5: Discussion, Conclusion, and Recommendations

The study explored learning transfer. It focused on training of social service employees who work with individuals and families facing social problems including mental illness. Participants of the study work at a county government social service organization to improve life for its residents. This qualitative, case study provides details about how training is approved, the way employees are prepared for training, how training is aligned with its mission, how employee interaction is done with others, the way training is determined, how guidance is used, and the way employees share information after training is used.

This chapter begins with the social service employee responsibilities, ongoing changes in the field and training budget allowance. It further speaks to the need of managers, training specialists, and HRD specialists to see to it that social service provide services that are needed and timely. The interpretation of findings is outlined by responses to the research questions followed by an interpretation. The limitations of the study give focus to size, criteria, selection of the research site, and available literature. The recommendations emphasize the need to implement learning transfer, involve managers, training specialists, and HRD specialists, provide instructions, establish a training approval process, and determine training that will complement the organization's goals and objectives. It continues with social change implications, which includes recommendations for practice. The recommendations for practice covers updates, new learning, partnerships and collaboration, training offerings, and technology. The chapter ends with a conclusion.

Employee Responsibilities. When considering the lives social service employees could save and the services they could offer, it is difficult to think of life without them. They are in the business of providing life-sustaining services. People face poverty, a troubled life, and a lack of resources. When people find themselves in such a difficult place, they call on a social service employee. Services are free and offered by federal, local and state governments. Their clients are adults, children, and families. Their responsibilities are to strengthen social awareness, provide justice, and work with other professionals.

Ongoing Changes. Employees cannot use yesterday's knowledge to keep pace with today's changes, it does not work. As changes take place in society, social service employees must change. The social service employees must update their knowledge through training to stay abreast, effective, and proficient. They need to know how to work with people considering suicide, those facing violence in the home, those abusing substances, and people returning to the community after being released from prison. They need to know how to offer mental health counseling and to determine health choices. They also need to know how to build relationships and to partner with stakeholders and colleagues. They need to know how to work with people on financial responsibilities, managing debt, and working against fraud. Other things they need to know is how to identify barriers, determine care for the community, using theories and technology.

Assistance is needed in knowing the importance of completing advance directives. They should know how to embrace diversity and advocate where they are champions for the vulnerable population. The field of geriatrics has grown where social service employees are needed to work with the aging population on long-term healthcare.

In other healthcare fields (e.g., Affordable Care Act, Medicaid, etc.). They are needed to assist people with the completion of health forms, disseminating information in the community, and providing referrals. Most mental health counseling comes from social service employees. The Department of Veterans Affairs employs the largest number of social workers. It is estimated there are 22,658,000 veterans in the United States (H. Rep. No. 1466, 2014). Veterans suffer from the abuse of drugs and alcohol, depression, and stress. The veterans tend to commit suicide. People from other countries reside in the United States with needs social services. English is not their first language and their customs are different.

Demands for service will continue from individuals suffering poverty and discrimination (Iglehart & Becerra, 2011). As Pope, et al. (2014) mentioned, in the rural Appalachia and other areas, young people leave home in search of employment and better living. When they leave, older members and children are left to fend for themselves. In some situations, people struggle to make decisions. They face traumatic situations including bereavement. For example, when it comes to funerals, the estimated cost is 6,500 - \$8,800 (Thompson & Yeung, 2015). The government takes on limited responsibility and grants are not sufficient. For people with limited funding, funeral costs could consume most of their annual income. It is assumed that families spend more on death than sickness. As Thompson and Yeung (2015) indicated, assistance is needed to clarify the law and to discuss ways to handle the experience.

Training Budget. Employees must continuously take training that offers new knowledge and application for the current times. Updated training benefits the employee, organization, and society. People in society need information and services that are current

and useful. Social service organizations are allotted funding for short and long-term training and conferences. Listening to the participants of this study, mandatory training is often the same. It is not known if officials of the social service organization collaborate with training organizations, colleges or university officials to offer up-to-date training. It is not known if training specialists go out into industry in search of new and different training offerings. It is not known if the employees exercise initiative to learn newer trending issues or if they voice concern for desired training on newer subjects. It was mentioned that when meeting with the manger, only a select few voices were heard.

Providing outdated information and services is not acceptable. It is a detriment to the client, to the organization, and to the employee's career well-being. When an organization does not keep pace with time, employees do not excel. Their performance is mediocre, and their skills and value decline. The organization is not considered high-functioning and skillful and talented career-seeking individuals look the other way for employment.

Managers, Training Specialists, and HRD Specialists Need to do More. Social service employees are the first line of defense, working closely with people in society. They hear the concerns, complaints, and successes people share. The managers, training specialists, and HRD specialists should work together to have a viable program for people in society. They need managers who use authority positively to approve appropriate training and provide instructions and expectations for the training. They need managers to manage.

Training specialists need to make sure that training offered is of use and up to date and aligned with the mission of the organization. Training specialists need to go to

colleges, universities, and training companies to find out about offerings to share with the organization and to make changes to training curriculums. They should speak on the organization's behalf about what colleges and universities offer. Their responsibility is to make sure training is pertinent to what the employees are tasked to do. They need to talk about the employee's work needs and expectations. They need training specialists who know how to devise a strategic plan for employee learning.

HRD specialists are needed to work with employees from the time of employment to the day of employment expiration. They need HRD specialists who are thoroughly familiar with each employee to meet and exceed organizational challenges.

Interpretation of Findings

Data confirmed there were limited training opportunities and numerous changes to the field. When it came to the image of social service employees associated with household chores for the young and elderly, the findings were not confirmed. Information specifically about household chores did not come up in the interviews. It was alluded to in the literature when young adults left homes in search of employment. Some of the material at the research site referred to household responsibilities. It is possible that because the study focused specifically on training and the role of the manager, training specialist, and HRD specialist that household chores did not emerge. Following is an interpretation of the research. It is presented after the research questions. Discussion points are incorporated. It highlights information found in the literature and the conceptual framework.

1. How do managers, training specialists, and human resource development specialists familiarize employees with learning transfer expectations?

The data revealed there was not a consistent way to approve training or to familiarize employees with learning transfer expectations. Employees were not prepared for training, and there was not a consistent time to meet to discuss training. There was confusion with the alignment of training on the mission of the organization.

The organization should have an approach to approving training. When organizations are not consistent with how it operates, there is confusion, favoritism, and an unclear path for employees to follow. When there is one way to approve training and it is revealed to the employees, everyone is on the same page.

Employees need managers, training specialists, and HRD specialists who are involved in the training process. When they are, they target the employee for successful application of learning. The goals and objectives of the training are clearly established and the employee is receptive to learning, which benefits the employee, the organization, and society. Employees should be prepared to attend training. When they are, they know what is expected and how the training fits into their job, the organization, and society. When employees speak of what was learned in training, it is not enough to articulate if the training facilitator was or was not good. Details are needed about what was taught, the value of the training, and the usefulness to clients and the benefits to the organization, and the differences it made generally. For the employees to provide useful feedback about training, the organization must ask leading questions, which can be established with a form.

A consistent time is needed to discuss training for three reasons: performance, funding justification, and career. Social service employees are employed based on knowledge, services to render, and the difference they can make in the organization. They

need new knowledge to stay current and relevant with the times. Updating of knowledge happens through the attendance of training, conferences, and the application and practice of the new knowledge. The employee's organization has a budget that supports the employee's training and conference needs. However, the budget must target training that will prepare the employees to meet the needs of people. A strategic plan is needed. The HRD specialist is needed to involve the employee with career challenges that are on par with the organization.

When employees join an organization, there is typically an orientation session to acquaint the employee with the mission, goals, and objectives of the organization. Periodically, the organization has meetings for all employees to go over management related issues. Followed by the meetings, managers meet with staff employees to explain how their work will be affected and the usefulness of the decisions. Align training with the mission of the organization. Leaders of organizations send employees to training sessions to sharpen knowledge and skills. Offering the same mandatory training year after year may help employees with reinforcement for new employees but it does not embrace new knowledge, skills or information for employees who do not need to attend the training. As laws, legislation, policies, and practices change, managers, training specialists, and HRD specialist must meet with employees to discuss how to incorporate changes into their responsibilities where they are in line with the goals of the organization. This is key in that it improves the chances for the employee to stay current.

The literature indicated it is difficult for employees to work with people when they are not knowledgeable and made known that the manager determines how training should link to the goals of the organization. Managers are to obtain from employees what

was learned in training to collaborate with other officials. In terms of universities and social service organizations working together, information from the manager is needed to “improve the content of education and quality of practice learning” (p. 4) to aid in the development of a framework for interest (Wilson, 2013).

Iglehart and Becerra (2011) commented that employees should learn from the past. Gibson (2014) indicated that employees might not abide by expectations of the organization because they come to the organization with standards and goals of interest to them and not the organization.

Skerrett (2000) indicated it is difficult for the employee to assist clients without knowledge of continuous shifts. Leberman, McDonald, and Doyle (2006) stated, “training elicits thoughts of working on particular skills” where the “learner plays a key role” (pp. 1 -2). Leberman et al. further commented that “transfer is a core concept in learning” and that “management must consider how training and development programs link into the overall strategic goals of the organization” (p. 3).

Green (2013) commented that the transfer of learning must include “cognitive/metacognitive” and “sociocultural camps” (p. 368). Kirkpatrick and Kirkpatrick (2005b) indicated that pre-training discussions are needed to develop clear expectations for learning. Werner and DeSimone (2009) explained that the manager is to work with employees on learning transfer after clarifying expectations and providing time to apply new learning. Russ-Eft (2002) mentioned reinforcing learning where employees show accountability in regularly held meetings to address specific topics and to offer debriefings. Mooney et al. (2014) stated, “students well trained” will do “good social work practice” (p. 375). Managers and employees are frustrated, and transfer of

learning fails. Haskell (2001) mentioned it has been difficult to transfer to the organization what has been taught. Leberman et al. (2006) commented that the transfer of learning is the connection between what was learned and performance.

If the transfer does not happen, there is a gap. Managers ensure employees are knowledgeable of the organization's goals and objectives. The manager makes the determination of workflow and organizational objectives to accomplish (McGregor, 1960). However, employees need instructions for guidance (Drucker, 1986).

Training specialists work with employees on "knowledge, skills, and attitudes" (Kirkpatrick & Kirkpatrick, 2005a, p. 42). They determine if an employee's behavior does not change after attending training due to the environment or personal matters. Russ-Eft (2002) asserted that HRD specialists should do more than describe influences, they are to help with the transfer of learning and focus on the employee's learning throughout employment (Mohanty & Routray, 2010).

1a. What factors or conditions address the learning transfer function or activity?

There were not specific factors or conditions to address the learning transfer function or activity. The data indicated that there were limited interactions with colleagues and usually no interactions with stakeholders to address training needs. When interactions did occur, it was when needed and not on a consistent basis. Training opportunities were determined from reading e-mails and reviewing what was offered in the MD CHESSIE System.

The factors or condition that addressed the learning transfer function consisted of identifying training opportunities, using guidance, sharing things, and practicing. Social service employees must attend appropriate and up-to-date training. When employees

attend training, they must use that learning in some way to benefit themselves, the organization, and people in society. After learning information or techniques, employee should share and use the information to help solve social problems. There must be interactions with colleagues and stakeholders. When they interact, it is a way to pass along information, correct mis-information, incorporate perspectives, or to modify, explain, or illustrate what is believed.

Receiving e-mails of training offerings is a way to market training if selling, but not to identify valuable training for employees to attend. Training for employees should be based on needs that are in line with goals of the organization. Reviewing training offerings in the MD CHESSIE System may be appropriate but not if employees do not have time to thoroughly review and consider what is offered because of job responsibilities and deadlines. Employees need direction from the manager and assistance from the training specialist and the HRD specialist. The employee is employed to assist people in society. To take on the responsibility to find appropriate training may prove burdensome where limited attention is given to the best training selection.

The literature made known that life in the 21st-century rapidly changes, calling for training that keeps pace. It indicated that using technological systems is critical, especially for employees and leaders of organizations (Bernhardt, 2015). As Bernhardt (2015) commented, to function well in this world requires mastering technology and interacting effectively. Asrar-ul-Haq (2015) indicated that technology has forced organizations toward “new training and development” to meet challenges and opportunities (p. 101). Hopkins (2002) and Austin (2003) asserted that organizations need employees to learn relevant information to maintain value. Employees must

understand relationship building and social networks to obtain health-related resources. Employees should have a familiarity of cultural differences and health literacy to partner with communities. Shirky (2011) remarked that collaboration encompass “shared awareness” (p. 6) where goals and strategies are outlined. Collaborative efforts grow because officials of organizations realize social service employees are aware of “conventional, clinic-direct services” by solo professionals (p. 6).

Managers face challenges of diversity (including immigration), varying ages, gender distribution, employee rights, concern for privacy, different attitudes toward work, and balancing work and family. Social service employees must attend training that offers different techniques and unfamiliar situations to meet current demands (Bohlander & Snell, 2010). The work has changed from doing for people to working with them to do for themselves. Challenges are different from yesterday; there are expanded services and methods aligned with technology. Flexibilities are needed to meet situations and circumstances (“New Book,” 2014).

Managers must make sure training offered to employees is in line with the “goals and strategies” of the organization, especially since change happens (Bohlander & Snell, 2010, p. 307). Haskell (2000) mentioned that the future depends on what is learned. It is the transfer of knowledge that provides awareness, “technical innovation,” and “scientific discoveries” (p. 8).

Kirkpatrick and Kirkpatrick (2005b) stated, when an “organizational strategy has been set and communicated, it is critical for your training departments” to “align themselves closely with this strategy” (p. 27). To find training for employees to attend, training specialists and HRD specialists should play a significant role (McGuire, 2014).

Employees should play a part in “social networks, neighborhoods, and communities,” outlining health choices and participation (Andrews et al., 2013, p. 67).

1b. In the event there is not a learning transfer initiative or instructions how do employees integrate what was acquired in training to the organization?

The data indicated employees did not have written policies directing them to integrate what was learned in training to the organization. However, for certain training, administrative and personnel procedures were used. Because there was no guidance, employees merely shared likes and dislikes of training, referrals, and techniques. Written guidance is needed on training. The guidance should spell out when to hold discussions, things to mention, what to share, and the way training will meet job responsibilities and organizational goals. The guidance should include how training will benefit the employee, organization, and client. Sharing likes and dislikes of training attended is not sufficient to find out if training was worthy of time and money. The employee should inform the manager of potential areas to use what was learned in training and request permission to move forward. Employees can also draft reports of the training to help other employees determine need. The HRD specialist should work with employees on a plan of action for complicated issues. Obtaining referrals and techniques is a positive effort. For techniques, employees should create presentations to illustrate usage. Officials should house the presentations in the organization’s library for future use. The HRD specialists should use the presentations to develop unfamiliar employees.

In terms of processing information employees received in training. There was not a practice in place for managers, training specialists, and HRD specialists. Institute a

repository to collect knowledge. Make the repository available so that others can use the information to guide service, or to use as talking points.

The literature indicated that employees need professional judgment to know how or if to “follow procedures and guidance” (Trevithick, 2014, p. 300). Kirkpatrick and Kirkpatrick (2005b) commented that employees will share information when there is explicitly written guidance of expectations. When managers create guidance and model behavior of expectations, it fosters accountability. Rothwell (2008) stated, “Managers have a critically key role to play in staff development,” and learning will cultivate “talented workers for the future” (p. 2). Robbins (2001) noted that managers should expect employees to look at them as models. Swanson and Holton (2009) commented that the use of guidance helps employees build an application that creates alignment with strategy. They further mentioned that support for learning transfer should be part of the organization’s way of conducting business.

2. How do managers, training specialists, and human resource development specialists use learning acquired from employees who attend training?

The data found that the managers, training specialists, and HRD specialists shared information from employees with others informally. Their communication with colleagues on training issues happened as needed. Usually they did not meet with stakeholders to collaborate on training based on societal needs. When information from training is shared with colleagues routinely and formally where everyone in the organization learns. Sharing information with colleagues may reveal that others may not need to take the same training but more advanced training on the same topic. This could result in cost-saving measures.

Communication with colleagues about training issues is an invaluable tool and should occur more than when needed. It allows colleagues to discuss difficulties and devise lessons learned. It creates partnerships where knowledge is combined, modified and used. It can even eliminate duplicated efforts. However, it will require the managers to encourage team efforts. Depending on the employee's preferred way of working, the manager may have to offer incentives for colleagues to communicate regularly.

Employees are missing valuable information when connections are not made with stakeholders. When people meet with stakeholders, it is way to encourage those meeting to discuss issues, resources, and problems. Everyone becomes the needs of people and realize the type of training to attend. Stakeholders offer suggestions on ways to address problems. Those in attendance may become aware of isolated instances of concerns or potential trouble.

The literature indicated that the key to effective training is familiarity with the needs of the organization. To find the needs, ask questions, listen to feedback, conduct surveys, observe, talk with stakeholders and clients, and translate suggestions and recommendations into long and short-term training goals (George & Weimerskirch, 1994). Because of the continuously changing profession, care workers need continuous learning. Kyndt et al. (2014) stated, "Society has grown into a knowledge society" where employees are expected to "learn strategies," and "work efficiently" (p. 2392). Employees can learn a great deal from "colleagues through verbal communication" (p. 2392). Kuenkel, Gerlach, and Frieg (2011) asserted that dialogue with stakeholders' leads to outcomes that would not happen otherwise. When there is communication with stakeholders, it is easier to implement results. Stakeholders see the broader picture of a

situation largely because of “ownership for the results” (p. 25). They asserted that collective intelligence forms interactions. They further mentioned that dialogues lead to involved and constructive listening and decision-making.

Wilson (2013) stated “social issues cannot be tackled by organizations acting alone” (p. 5). Collaboration and partnerships develop synergy to work across boundaries for a common goal. Collaboration creates shared resources and improves efficiency. It develops “coordination” and creates an opportunity for “mutual learning” (p. 5). Parrish et al. (2013) indicated that collaboration is important when it comes to engaging community development. Mooney et al. (2014) commented that collaboration with others is significant. Mizrahi and Davis (2008) commented that employees use collaboration to improve the client’s quality of life. They found a growing need for collaboration because problems constantly develop. Parrish et al. (2013) used a self-study method to engage providers in community development to meet the needs and interests of residents. They mentioned the importance of collaborating, stating “Collaboration is a learned behavior” and is important to be successful (p. 355).

Using the conceptual framework found in Chapter 2, there is structure and direction, which will incorporate shifting paradigms. Shifts are inevitable and are the one thing that is consistent with social services. The framework is what keeps the organization and its employees informed of shifts in society. Without the framework, knowledge is not passed along strategically or thoroughly. It allows for organizational inclusion and accountability, which aids in support for learning transfer. It ensures information and services provided are up-to-date and that there is organizational alignment. It reveals a relationship with society and the organization, the organization

and Kirkpatrick and Kirkpatrick's theory, Drucker's theory, and McGregor's theory, and the employee and the employee and managers, training specialists, and HRD specialists. When there is a shift in paradigms, it is presented in society and discussed with the social service organization. The social service top officials then share information with the managers and training specialists. The training specialists will then make sure that training offerings include the shifts. When the manager approves training, he or she examines the training for content, the mission and goals of the organization, and needs of the employee and people. When the employee's training has been approved, the training specialist makes sure that there is clarity of content and that the employees know how to transfer the new learning. The result is that people in society will benefit from timely and useable information that has been vetted through the organization.

Limitations of the Study

The limitations were sample size, criteria, selection of a single research site, and available literature. With qualitative case study methodologies, there is not a definite sample size to use. In this study, all participants were females. Fifteen participants may have been too small to capture a balance of female and male participants that met the criteria. With a larger sample size, data collected many have resulted in different responses. In hindsight, with permission of the Director, Department of Social Services, I should have requested two days to present an overview of the study and used the second day for employees who could not attend the first day because of scheduling conflicts. As a result, there may have been a balance of female and male participants. If participants were from more than one research site, data collected may have been different. Another option could have been to collect data from two or three research sites and to request a

percent of the organization to participate. With this approach, there may have been a balance of female and male participants.

To participate, individuals had to meet criteria where they self-identified and provided a title that matched their current or former job responsibilities. Schwarz (1999) asserted that “self-reports are a fallible source of data” (p. 93). They report what they believe to be correct or what they think the researcher wants to hear. Sometimes their memories of events are distortions of what is real, other times they “intentionally misrepresent the facts” to bring forth a positive impression (Leedy & Ormrod, 2005, p. 184). It is not known if participants met the criteria, individuals were informed that they had to meet the criteria to participate in the study. It was their personal decision to participate after hearing and reading the criteria. They were given time to ask questions about any parts of the study. It is possible the criteria unintentionally precluded males from participating.

There are 24 counties and county equivalents in the state of Maryland. A different technique may have been to consider two or three counties in Maryland to make a comparison. With the inclusion of two or three counties, one or both counties may have had a training approval process, expectations for learning transfer, training alignment with the organization, interactions with colleagues and stakeholders, written training guidance, an approach to use what employees shared after training, information on collaborations with others, and ongoing meetings with stakeholders.

When it came to available literature, information was found but not on the approval of training. It did present that managers are to collaborate with others on what employees provide (Wilson, 2013). It did not speak to familiarizing employees with

learning transfer. It did bring to light that if the transfer of what was learned did not happen, there was a gap (McGregor, 1960). It further made known that HRD specialists must assist with the transfer of learning (Mohanty & Routray, 2010). When examining preparing employees for training, the literature merely mentioned learning from the past (Becerra, 2011). On how often meetings should take place, it was suggested to have regular meetings and debriefings on topics (Russ-Eft, 2002). The literature made it clear that managers are to see to it that training links to organizational goals (Wilson, 2013).

On how often to interact with colleagues and stakeholders, the literature mentioned having knowledge and building relationships (Hopkins 2002; Austin, 2003). It did not go into details about the way interactions should occur or how often. It did not mention how to determine training opportunities, only that training specialists and HRD specialists need to be involved in the process (Andrews et al., 2013). When exploring written guidance when meeting with employees after training, information was not available. The literature did mention that managers should have an expectation that employees look at them as models (Robbins, 2001). Moreover, it made known that guidance is helpful to employees when it comes to training alignment (Swanson & Holton, 2009). It did not mention what happens when employees share information with colleagues. It did cover ways to share information and the importance of meeting with colleagues to collaborate on training. It revealed what it means to communicate with stakeholders (Kuenkel, Gerlach, & Frieg, 2011). It highlighted the purpose of collaboration (Wilson, 2013). The literature indicated the importance of collaboration (Parrish et al., 2013). Finally, the literature provided ways that collaboration improves the lives of clients (Mizrahi & Davis, 2008).

Recommendations

The current situation is that there are inconsistencies in the way managers, training specialists, and HRD specialists work with employees who attend training. There are different approaches used to approve training and there is not an explicitly known expectation for training results. There is not a practice in place to prepare employees to attend training, or to meet and discuss training. Clarification is needed on what it meant to align training with the mission of the organization. When examining ways used to address learning transfer, the responses were about what happened in the past, talking with others informally, or not doing anything. When informal conversations were held with colleagues, it happened as needed, monthly, quarterly, or once a year. Training opportunities were determined by looking through e-mails and catalogs. There was not a known way for employees to integrate new learning into the organization. When employees shared something, it was if the training was “good or not and why” (Participant 773), handouts, techniques, and likes and dislikes of training. There was nothing in place to process what was obtained from training. When managers, training specialists, and HRD specialists received something from employees who attended training, it was shared informally at meetings or with counterparts when needed. At other times, things were shared quarterly or not at all. Meetings were not held with stakeholders because it was not a requirement.

Considering the research findings, observations made, and literature, the following recommendations are offered to make for a more efficient organization. This study goes beyond the Prince George’s County Department of Social Services; it can assist any organization with a critical mission to strengthen the life of others. With the

use of the recommendations, the needs of society and the goals of the organization are partnered with a conceptual framework for training alignment.

Implement Learning Transfer. Before employees attend training, prepare them to learn. Align training with organizational goals. Have employees collaborate with stakeholders and people in society before training selections have been determined. Do this to stimulate ideas and to consider needs. Make sure the managers, training specialists, and HRD specialists provide suggested training topics. Have them work with employees to make sure thought has been given to how the training will assist with concerns of the people, stakeholders, and the organization. Prioritize and distribute work of employees attending training or at least make it an option. Challenge employees to discuss what was learned in training with the manager, training specialist, and HRD specialist for direction. Have discussions with employees to brainstorm ways to implement new learning. Arrange meetings, discussion sessions, and telephone conversations to share new knowledge. As Gilley and Maycunich (2000) indicated, incorporation and distribution of knowledge throughout the organization are a critical concern that organization's face.

Involve Managers, Training Specialists, and HRD Specialists. Managers, training specialists, and HRD specialists should have a clear understanding of training needs for employees and the organization. Involve them in the training loop. Give them the responsibility to create a strategic training plan. Have them identify and submit appropriate training for employees to attend on an ongoing basis. Make sure the manager is involved in training for organizational, performance, and training alignment purposes. Have managers collaborate with stakeholders on needs to establish training direction.

Establish a budget plan for employee training. Encourage training specialists to suggest training offerings to the manager for employees. Have the HRD specialists to work with employees at the initial stage of employment to keep pace with shifts in paradigms and employee training needs. Make sure the HRD specialist incorporates a future focus and employee job expansion.

Provide Instructions. Establish standard operating instructions for training offerings paid for or offered by the organization. Include what is appropriate to share with colleagues, people in society, and stakeholders. Hold annual training sessions and invite stakeholders. Hold briefing sessions with people in society to ensure needs are heard and projects are established to handle the needs. Address the needs obtained from the briefing sessions. Have the training specialists and the HRD specialists document needs in a three to five-year training plan.

Establish a Training Approval Process. Establish a training approval process that is consistent through the organization. Prepare a process that eliminates redundancy and confusion. Make clear that training is supported and that the organization stands behind training selections. Incorporate expectations, organizational and societal alignment, cost, dress code, and use of new knowledge.

Determine Training that Complements the Organization's Goals and Objectives. Establish a structure to review, consider, approve, or disapprove training. Establish training criteria after establishing a committee with stakeholders, organizational officials, and employees to obtain support. Create an evaluation process for training completion. Use the process to determine effectiveness, value, and future use.

Social Change Implications

This study offers potential impact for positive social change at the organizational and societal levels. It suggests that when employees are familiarized with learning transfer expectations, the organization has a system in place to approve training that is known to the employees. Employees are aware of training needed to fulfil organizational responsibilities that support needs and goals. Regular meetings to discuss training are held between the employee and manager, the manager and training specialist, and the employee, training specialists, and HRD specialist. Employees go into training sessions knowing what they are expected to learn and the expectation for training aligns with the mission of the organization. The study makes known the importance of routinely involving stakeholders in discussions about training.

The study implies a process is needed to determine training opportunities to offer employees. It reveals the limitations of the current practice. It makes known that a process is needed to integrate what employees learn in training into the organization and that procedures are needed to make sure collaboration with stakeholders are routinely held to obtain first-hand knowledge of society's expectations and needs.

The current practice does not formalize training in a consistent way. With the assistance of Figure 1, *Learning transfer in a social service organization*, a process is offered that will require policies to create a practice to approve training, hold regular meetings to discuss training, involve stakeholders, determine training opportunities, and to integrate into the organization what employees learn in training.

As a practice, it is recommended that employees attend up to date training regularly. It is further recommended that employees practice new learning, establish ongoing partnerships, and collaborate with stakeholders. Employees need training that has been vetted through the organization. They need to use technology as part of their job responsibilities (Lee et al., 2015). Guidance is needed. Before employees' attend training, managers should remind employees of the organization's priorities (Leberman et al., 2006). When informed of the organization's priorities before training, it helps the employee to keep in mind goals and objectives to link new knowledge. It reinforces direction where employees have an opportunity to ask pertinent questions and work through scenarios that compliment organizational responsibilities.

Obtain Regular Updates. Regular updates on training offers current information. Without regular updates, the employees and its organization are stagnant. Make the training specialists aware of employee needs. When the needs are known, have training specialists scout around to find out about newly released training that will strengthen the employees' knowledge.

Practice New Learning. Time is needed after training to allow employees to practice new learning without rushing back to the job to handle work responsibilities. Annual or bi-annual training conferences will aid with this need. During the time of the conferences, have employees practice the new learning. It allows the employee to ask questions, practice with others, present scenarios, obtain advice, and to hear about lessons learned. Offering the same mandatory training is not useful. Even Addams (1912) mentioned that before society changes, it must be enlightened. Learning requires preparation and "collaborative project-based learning" (Bernhardt, 2015, p. 1). Susskind

and Susskind (2015) mentioned that as human beings we have limited knowledge, we “look to doctors, teachers, lawyers, and other professions” (p. xx) for expertise.

Establish Partnerships and Collaborate with Stakeholders. Ongoing partnerships are needed with stakeholders. Without partnerships, employees have a limited view and understanding of how to best work with and serve people in society. Stakeholders are in the hospitals, clinics, schools, universities, governments, and financial institutions. They see what happens. They are around the world conducting research, meeting to discuss trends, services, and information to address the needs of people. Franklin (2005) even commented that social service employees must prepare themselves to work with many stakeholders. Even Green (2013) mentioned that individuals in higher education institutions are working to collaborate with industry.

Review Training Offerings. Offer training content that has been vetted through the organization. Have training specialists to present information on approved training offerings. See to it that HRD specialists modify training submissions to meet the needs of employees. Presently, there is a need for training on application, use of tools, strategies, effects of substance abuse, professional judgment, bereavement, trauma, navigating the organization, technology, data management, and shame (Futris et al., 2014; Kyndt et al., 2014, Pope et al., 2014, Trevithick, 2014, Mooney et al., 2014; Gibson, 2014). Offer guidance and expectations for the learning.

Routinely Use Technology. Have employees to use technology as a part of job responsibilities. When technology is not routinely used, the organization and its employees are not operating as needed in the 21st century. Gore (2013) mentioned that employees with technology savvy are relevant for this century and those without it have

difficulties meeting work demands. With the use of technology, people in society receive richer, valuable information, and timely service. Technology allows the employees to incorporate information with that of stakeholders, enabling them to enhance discussions with clients, collaborate on efforts, and maintain contact with the organization and emergency points of contact. The employees can use technology for online learning and webinars and collaborations.

Stroh (2015) indicated to establish social change, examine the foundation, face the current reality, establish ways to bridge the gaps, and make an explicit choice to commit. This approach was used to create a venue for social change. First, an examination was made of the field of social service, which indicate the requirements of the employees, problems in the field, and the purpose of the study. Second, an examination was made of the current reality. Research questions were created and a sample of the population was interviewed and observed in their natural setting. Third, to establish ways to bridge any gaps, a theoretical foundation, a conceptual framework, and literature were examined. Fourth, Interpretation of the findings and recommendations were offered to make an explicit choice to commit.

The implications reveal that employees, managers, training specialists, and HRD specialists could positively change the way business is conducted, which will have an impact on society. People depend on social service employees for protection, shelter, care, and other life-sustaining assistance (Roberts, 2009; Summers, 2010). Employees must maintain proficiency by staying abreast of changes in the field through the involvement of managers, training specialists, and HRD specialists when it comes to training. Managers can positively affect employee performance by approving training in

line with the mission and goals of the organization (Drucker, 1986). When the training specialists incorporate Kirkpatrick and Kirkpatrick's theory, it ensures employees are better prepared to transfer learning. When the HRD specialist is involved with employees throughout employment, they can assist with ever-occurring changes (Mohanty & Routray, 2010). When managers, training specialists, and HRD specialists work toward learning transfer, ambiguities, uncertainties, and tensions are lessened, and what was learned in training is integrated into the organization and used.

This study is of value to organizations. It reveals that learning transfer is critical to sustain quality living. Implementation of learning transfer will provide improvements to social service employees, their managers, training specialists, and HRD specialists. Social service organizations do not focus on learning transfer practices. The results of this study provide evidence that managers, training specialists, and HRD specialists could create a culture to encourage learning transfer. As they utilize learning transfer as viable way to conduct business, it may establish vital practices across organizations in the community. Social service leaders throughout the community could collaborate to discuss learning transfer, creating improvements, adding value, and insight throughout society. The results contribute to positive social change and the improvements of practices because managers, training specialists, and HRD specialists can understand learning transfer practices that are necessary to provide awareness and clarity within their organization.

Conclusions

Social service employees touch the lives of those often forgotten, left behind, and in need. Learning transfer is a complimentary approach to keep social service employees

knowledgeable and skillful, able to adapt to change quickly, and in line with the goals and mission of the organization. Not only does this study give insight of the current reality, it uses theories and a conceptual framework to establish training integration, guidance and collaboration. It offers recommendations and identifies social change implications for the social service community. This study works to close the gap about the way managers, training specialists, and HRD specialists familiarize social service employees with learning transfer expectations.

References

- Addams, J. (1912). *A new conscience and an ancient evil*. New York, NY: The MacMillan Company.
- Andrews, C. M., Darnell, J. S., McBride, T. D., & Gehlert, S. (2013). Social work and implementation of affordable care act. *Health & Social Work, 38*, 67-127. doi:10.1093/hsw/hlt002
- Aryee, S., Walumbwa, F. O., Seidu, E. Y., & Otake, L. E. (2016). Developing and leveraging human capital resource to promote service quality: Testing a theory of performance. *Journal of Management, 42*, 480-499. doi:10.1177/0149206312471394
- Asrar-ul-Haq, M. (2015). Human resource development in Pakistan: Evolution, trends and challenges. *Human Resource Development International, 18*, 97-104. doi:10.1080/13678868.2014.979004
- Austin, M. J. (2003). The changing relationship between nonprofit organizations and public social service agencies in the era of welfare reform. *Nonprofit and Voluntary Sector Quarterly, 32*, 97-114. doi:10.1177/0899764002250008
- Ayon, C. (2013). Service needs among Latino immigrant families: Implications for social work practice. *Social Work, 59*, 13-23. doi:10.1093/sw/swt031
- Baek, P., & Kim, N. (2014). Exploring a theoretical foundation for HRD in society: Toward a model of stakeholder-based HRD. *Human Resource Development International, 17*, 499-513. doi:10.1080/13678868.2014.954189

- Bai, J. (2014). What is the role of social work in China? *Advances in Social Work, 15*, 495-506. Retrieved from <http://journals.iupui.edu/index.php/advancesinsocialwork/index>
- Bailey, H. (2015). I want my social worker. *Journal of Social Work Practice: Psychotherapeutic Approaches in Health, Welfare and the Community, 29*, 223-229. doi:10.1080/02650533.2015.1021309
- Balboni, T. A., Vanderwerker, L. C., Block, S. D., Paulk, M. E., Lathan, C. S., Peteet, J. R., & Prigerson, H. G. (2007). Religiousness and spiritual support among advanced cancer patients and associations with end-of-life treatment preferences and quality of life. *Journal of Clinical Oncology, 25*, 555 – 560.
- Bazeley, P. (2013). *Qualitative data analysis, practical strategies*. Thousand Oaks, CA: Sage.
- Beddoe, L. (2014). Civic practice: A new professional paradigm for social work. *Journal of Social Work, 14*, 147-164. doi:10.1177/1468017313477316
- Bernard, H. R. (2011). *Research methods in anthropology, qualitative and quantitative approaches* (5th ed.). New York: NY: Rowman and Littlefield.
- Bernhardt, P. E. (2015). 21st- Century learning: Professional development in practice. *The Qualitative Report, 20*, 1-19. Retrieved from <http://nsuworks.nova.edu/tqr/>
- Birks, M., & Mills, J. (2015). *Grounded theory, a practical guide* (2nd ed.). Thousand Oaks, CA: Sage.
- Bloom, B. S. (1956). *Taxonomy of educational objectives: The classification of educational goals, handbook 1, cognitive domain*. New York, NY: David McKay.

- Bohlander, G., & Snell, S. (2010). *Managing human resources* (15th ed.). Mason, OH: South-Western, Cengage Learning.
- Brand, M. W., & Weiss, E. L. (2015). Social workers in combat: Application of advanced practice competencies in military social work and implications for social work education. *Journal of Social Work Education, 51*, 153-168. doi:10.1080/10437797.2015.979094
- Boitel, C. R., & Fromm, L. R. (2014). Defining signature pedagogy in social work education: Learning theory and the learning contract. *Journal of Social Work Education, 50*, 608-622. doi:10.1080/10437797.2014.947161
- Borgatti, S. (1996). *Introduction to grounded theory*. Retrieved from <http://www.analytictech.com/mb870/introtogt.htm>
- Bryant, A., & Charmaz, K. (2010). *The sage handbook of grounded theory*. Thousand Oaks, CA: Sage.
- Burg, D. F. (2005). *The great depression* (Updated ed.). New York, NY: Facts on File.
- Busi, M. (2013). *Doing research that matters: Shaping the future of management*. Wagon Lane, UK: Emerald Group.
- Campbell, E., & Lassiter, L.E. (2015). *Doing ethnography today: Theories, methods, exercises*. West Sussex, UK: John Wiley.
- Canfield, M. R., & Wilson, E. O. (2011). *Field notes on science and nature*. Cambridge, MA: Harvard University Press.
- Carey, B. (2011, May 21). Need therapy? A good man is hard to find. *New York Times*, p. A1. Retrieved from <http://www.nytimes.com/>

- Carnochan, S., Samples, M., Myers, M., & Austin, M. J. (2014). Performance measurement challenges in nonprofit human service organizations. *Nonprofit and Voluntary Sector Quarterly, 43*, 1014-1032. doi:10.1177/0899764013508009
- Charmaz, K. (2014). *Constructing grounded theory*. Thousand Oaks, CA: Sage.
- Cherry, D., Dalton, B., & Dugan, A. (2014). Self-efficacy in newly-hired child welfare workers. *Advances in Social Work, 15*, 318-333. Retrieved from <http://journals.iupui.edu/index.php/advancesinsocialwork/index>
- Clark, H. H., & Gerrig, R. J. (1990). Quotations as demonstrations. *Language, 66*, 764 – 805. Doi: 10.2307/414729
- Conlon, A., & Aldredge, P. A. (2013). Department of health and human services changes: Implications for hospital social worker. *Health and Social Work, 38*, 19-27. doi:10.1093/hsw/hls063
- Cournoyer, B. R. (2013). *The social work skills workbook* (7th ed.). Belmont, CA: Cengage Learning.
- Creswell, J. W. (1998). *Qualitative inquiry and research design, choosing among five traditions*. Thousand Oaks, CA: Sage.
- Creswell, J. W. (2009). *Research design qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: Sage.
- Cronqvist, A., & Sundh, K. (2013). On collaboration between nurses and social workers in the service of older people living at home. *International Practice Development Journal, 3*(2). Retrieved from <http://www.fons.org/library/journal-ipdj-home>
- Cutcher-Gershenfeld, J. E. (2006). *The human side of enterprise* (Annotated ed.). New York, NY: McGraw-Hill.

- Dattalo, P. (2008). *Determining sample size, balancing power, precision, and practicality*. New York, NY: Oxford University.
- Davis, N. S. (2013). A heavenly collaboration: Social workers and churches working to increase advance directive completion among African American elderly. *Journal of Human Behavior in the Social Environment, 23*, 462-474.
doi:10.1080/10911359.2013.772415
- Denny, G. D., Miles, N. A. B., & Schneider, D. L. (2011). *Historic Prince George's County, a confluence of cultures*. San Antonio, TX: Historical Publishing Network.
- Denzin, N. K., & Lincoln, Y. S. (2011). *The sage handbook of qualitative research*. Thousand Oaks, CA: Sage.
- Despard, M. R., & Chowa, G. A. N. (2013). Training social workers in personal finance: An exploratory study. *Journal of Social Work Education, 49*, 689-700.
doi:10.1080/10437797.2013.812895
- Dodsworth, J., Bailey, S., Schofield, G., Cooper, N., Fleming, P., & Young, J. (2013). Internet technology: An empowering or alienating tool for communication between foster-carers and social workers. *British Journal of Social Work, 43*, 775-795. doi:10.1093/bjsw/bcs007
- Doel, M. (2012). *Social work: The basics*. New York, NY: Routledge.
- Doing a literature search: A step by step guide. (n.d.). *Liverpool Hope University*. Retrieved from https://www.hope.ac.uk/media/liverpoolhope/contentassets/documents/library/help/media,44344_en.pdf

- Drucker, P. (2001). *The essential Drucker: The best of sixty years of Peter Drucker's essential writings on management*. New York, NY: HarperCollins.
- Drucker, P. (1954). *The practice of management*. New York, NY: Harper & Row.
- Drucker, P. F. (1984). *The practice of management*. New York, NY: Butterworth-Heinemann.
- Drucker, P. (1986). *The practice of management* (2nd ed.). New York, NY: Harper Business.
- Drucker, P. E. (1990). *Managing the non-profit organization*. New York, NY: Routledge.
- Dupper, D. R., Rocha, C., Jackson, R. F., & Lodato, C. A. (2014). Broadly trained but narrowly used? Factors that predict the performance of environmental versus individual tasks by school social workers. *Children & Schools, 36*, 71-77.
doi:10.1093/cs/cdu004
- Emmel, N. (2013). *Sampling and choosing cases in qualitative research, a realistic approach*. Thousand Oaks, CA: Sage.
- ePodunk. (n.d.). *Landover, MD*. Retrieved from <http://www.epodunk.com/cgi-bin/geninfo.php?locIndex=2651>
- Factfinder. (n.d.). *Community facts - Find popular facts and frequently requested data about your community*. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>
- Farquhar, J. D. (2012). *Case study research*. Thousand Oaks, CA: Sage.
- Fellows, R., & Liu, A. (2015). *Research methods for construction* (4th ed.). Southern Gate, United Kingdom: John Wiley & Sons.
- Fetterman, D. M. (2010). *Ethnography, step-by-step* (3rd ed.). Washington, DC: Sage.

- Flick, U. (2002). *An introduction to qualitative research*. Thousand Oaks, CA: Sage.
- Flick, U. (2007). *Managing quality in qualitative research, qualitative research kit*. Thousand Oaks, CA: Sage.
- Flick, U. (2009). *An introduction to qualitative research* (4th ed.). Washington, DC: Sage.
- Fowler, F. J. (2014). *Survey research methods* (5th edition). Boston, MA: Sage.
- Franklin, C. (2005). The future of school social work practice: Current trends and opportunities. *Advances in Social Work, 6*, 167-181. Retrieved from <http://journals.iupui.edu/index.php/advancesinsocialwork/index>
- Frumkin, P. (2002). *On being nonprofit: A conceptual and policy primer*. Cambridge, MA: Harvard University.
- Futris, T. G., Schramm, D. G., Lee, T. K., Thurston, W. D., & Barton, A. W. (2014). Training child welfare professionals to support healthy couple relationships: Examining the link to training transfer. *Journal of Public Child Welfare, 8*, 560-583. doi:10.1080/15548732.2014.953719
- Galley, D., & Parrish, M. (2014, July 25). Why are there so few male social workers? *The Guardian*. Retrieved from <https://www.theguardian.com/>
- Gay, L. R., & Airasian, P. (2000). *Educational research: Competencies for analysis and application* (6th ed.). Old Tappan, NJ: Merrill.
- George, S., & Weimerskirch, A. (1994). *Total quality management*. New York, NY: John Wiley & Son.
- Gerring, J. (2016). *Case study research: Principles and practices*. New York, NY: Cambridge.

- Gibson, M. (2014). Social worker shame in child and family social work: In adequacy, failure, and struggle to practice humanely. *Journal of Social Work Practice, 28*, 417-431. doi:10.1080/02650533.2014.913237
- Gilley, J. W., & Maycunich, A. (2000). *Organizational learning performance and change, an introduction to strategic human resource development*. Cambridge, MA: Perseus Publishing.
- Glicken, M. D. (2011). *Social work in the 21st-century, an introduction to social welfare, social issues, and the profession*. New Delhi, India: Sage.
- Goleman, D., & Boyatzis, R. (2013). *On collaboration*. Boston, MA: Harvard Business Review.
- Gore, V. (2013). 21st- Century skills and prospective job challenges. *The IUP Journal of Soft Skills, VII*, 7-14. Retrieved from http://www.iupindia.in/Soft_Skills.asp
- Graddy, E. A., & Chen, B. (2006). Influences on the size and scope of networks for social service delivery. *Journal of Public Administration Research and Theory, 4*, 533-552. doi:10.1093/jopart/muj005
- Gray, D. E. (2014). *Doing research in the real world*. Thousand Oaks, CA: Sage.
- Gray, M., & Schubert, L. (2013). Systematic literature review knowing what we know about knowledge in social work: The search for a comprehensive model of knowledge production. *International Journal of Social Welfare, 22*, 334-346. doi:10.1111/ijsw.12013
- Green, J. H. (2013). Transfer of learning and its ascendancy in higher education: A cultural critique. *Teaching in Higher Education, 18*, 365-376. doi:10.1080/13562517.2012.719155

- Greenhalgh, T. (2006). How to formulate research recommendations: The pie or the slice? *The BMJ*, 333(7574), 917. doi:10.1136/bmj.33.7574.914-a
- Griffin, R. (2013). *Means and end*. Retrieved from <http://www.trainingjournal.com/articles/interview/means-and-end>
- Guest, G., Namey, E. E. & Mitchell, M. L. (2013). *Collecting qualitative data: A field manual for applied research*. Thousand Oaks, CA: Sage.
- Gurbuz, S. (2014). Revisiting theory X and Y, a multilevel analysis of the effects of leaders' managerial assumptions on followers' attitudes. *Management Decision*, 52, 1888-1906. doi:10.1108/MD-06-2013-0357
- Hair, H. J. (2013). The purpose and duration of supervision, and the training and discipline of supervisors: What social workers say they need to provide effective services. *British Journal of Social Work*, 43, 1562-1588. doi:10.1093/bjsw/bcs071
- Hancock, D. R., & Algozine, B. (2016). *Doing case study research: A practical guide for beginning researchers*. (3rd edition). New York, NY: Teachers College.
- Handshaw, D. (2014). *Training that delivers results*. Washington, DC: American Management Association.
- Hardcastle, D. (2011). *Community practice: Theories and skills for social workers*. New York, NY: Oxford University.
- Hardcastle, D., Powers, P., & Wenocur, S. (2011). *Community practice: Theories and skills for social workers*. New York, NY: Oxford University.
- Hardina, D., Middleton, J., Montana, S., & Simpson, R. (2007). *An empowering approach to managing social service organizations*. New York, NY: Springer.

- Harington, P. R. J., & Beddoe, L. (2014). Civic practice: A new professional paradigm for social work. *Journal of Social Work, 14*, 147-164. doi:10.1177/1468017313477316
- Harris, M. (2010). *Evaluating public and community health programs*. San Francisco, CA: John Wiley & Sons.
- Haskell, R. E. (2000). *Transfer of learning: Cognition and instructional educational psychology*. New York, NY: Academic Press.
- Haskell, R. E. (2001). *Transfer of learning: Cognition, instruction and reasoning*. San Diego, CA: Academic Press.
- Hawley, J. D., & Barnard, J. K. (2005). Work environment characteristics and implications for training transfer: A case study of the nuclear power industry. *Human Resource Development International, 8*, 65-80. doi:10.1080/1367886042000338308
- Hoffmann, M., & Freeman, J. (2014). Supporting transfer of learning for staff in relational practice. *Relational Child and Youth Care Practice, 27*, 36-40. Retrieved from <http://www.cyc-net.org/journals/rcycp/index.html>
- Hopkins, J. (2002). *Social theory, social change and social work: Social work through the looking glass*. New York, NY: Routledge.
- House, E. R. (2010). *Evaluating with validity* (PB). Charlotte, NC: IAP.
- H. Rep. No. 1466 at 113. (2014).
- Huang, Y., Strawderman, L., Babski-Reeves, K., Ahmed, S., & Salehi, A. (2014). Training effectiveness and trainee performance in a voluntary training program:

- Are trainees really motivated? *Nonprofit and Voluntary Sector Quarterly*, 43, 1095-1110. doi:10.1177/0899764013506787
- Hunter, D., Thorpe, S., Brown, H., & Bailey, A. (2012). *The art of facilitation, the essentials of leading great meetings and creating group synergy*. San Francisco, CA: Jossey-Bass.
- Hunting, K. L., & Gleason, B. L. (2012). *Essential case studies in public health, putting public health into practice*. Burlington, MA: Jones & Bartlett Learning.
- Iglehart, A. P., & Becerra, R. M. (2011). *Social services and the ethnic community: History and analysis* (2nd ed.). Long Grove, IL: Waveland.
- Jick, T. D. (1979). Mixing qualitative and quantitative methods: Triangulation in action. *Administrative Science Quarterly*, 24, 602-611.
- Jivanjee, P., Pendell, K. D., Nissen, L., & Goodluck, C. (2015). Lifelong learning in social work: A qualitative exploration with social work practitioners, students, and field instructors. *Advances in Social Work*, 16, 260 – 275, Doi: 10.18060/18407
- Kagan, M. (2015). Public attitudes and knowledge about social workers in Israel. *Journal of Social Work*. Advance online publication. doi:10.1177/1468017315572937
- Karger, H. J., & Stoesz, D. (2013). *American social welfare policy: A pluralist approach* (7th ed.). Boston, MA: Allyn & Bacon.
- Karger, H.J., & Stoesz, D. (2018). *American social welfare policy: A pluralist approach* (8th ed.) New York, NY: Pearson.
- Khan, M. I. (2014). *Understanding triangulation: Management science context*. Columbia, MO: Global Digital.

- Kirkpatrick, D. L., & Kirkpatrick, J. D. (2005a). *Training programs: The four levels* (3rd ed.). San Francisco, CA: Berrett-Koehler.
- Kirkpatrick, D. L., & Kirkpatrick, J. D. (2005b). *Transferring learning to behavior: Using the four levels to improve performance*. San Francisco, CA: Berrett-Koehler.
- Kirkpatrick, D. L., & Kirkpatrick, J. D. (2007). *Implementing the four levels*. San Francisco, CA: Berrett-Koehler.
- Kirkpatrick, J. D., & Kirkpatrick, W. K. (2015). Creating a post-training evaluation plan [online]. *Training & Development*, 42(1), 12-13. Retrieved from <https://www.td.org/Publications/Magazines/TD>
- Kirkpatrick, J. D., & Kirkpatrick, W. K. (2016). *Kirkpatrick's four levels of training evaluation*. Alexandria, VA: Association for Talent Development.
- Kocher, R., Emanuel, E., & DeParle, N. (2010). The affordable care act and the future of clinical medicine: The opportunities and challenges. *Annals of Internal Medicine*, 153, 536-539. doi:10.7326/0003-4819-153-8-201010190-00274
- Knowles, M. S., & Holton, E. F. (2012). *The adult learner: The definitive classic in adult education and human resource development*. (7th edition). New York, NY: Routledge.
- Knox, S. S. (2010). *Science, God and the nature of reality: Bias in biomedical research*. Boca Raton, FL: Brown Walker.
- Kuenkel, P., Gerlach, S., & Frieg, V. (2011). *Working with stakeholder dialogues, key concepts and competencies for achieving common goals, a practical guide for*

change agents from public sector, private section and civil society. Woodstock, Cape Town, South Africa: Collective Leadership.

Kumar, R. (2014). *Research methodology: A step-by-step guide for beginners.* Thousand Oaks, CA: Sage.

Kvale, S. (2007). *Doing interviews.* Thousand Oaks, CA: Sage.

Kyndt, E., Govaerts, N., Verbeek, E., & Dochy, F. (2014). Development and validation of a questionnaire on informal workplace learning outcomes: A study among socio-educational care workers. *British Journal of Social Work, 44*, 2391-2410. doi:10.1093/bjsw/bct056

Lapan, S. D., Quartaroli, M. T., & Riemer, F. J. (2012). *Qualitative research. An Introduction to methods and designs.* San Francisco, CA: Jossey-Bass.

Leberman, S., McDonald, L., & Doyle, S. (2006). *The transfer of learning, participants' perspectives of adult education and training.* Burlington, VT: Gower.

Lee, P. Y., Liew, S. M., Abdullah, A., Abdullah, N., Ng, C. J., Hanafi, N. S., . . . Khoo, E. M. (2015). Healthcare professionals' and policy makers' views on implementing a clinical practice guideline of hypertension management: A qualitative study. *PloS ONE, 10*. doi: 10.1371/journal.pone.0126191

Leedy, P. D., & Ormrod, J. E. (2005). *Practical research, planning and design* (8th ed.). Old Tappan, NJ: Pearson Merrill Prentice Hall.

LeCompte, M. D., & Schensul, J. J. (2010). *Designing and conducting ethnographic research, an introduction* (2nd ed.). Lanham, MD: AltaMira.

Liebermann, S., & Hoffmann, S. (2008). The impact of practical relevance on training transfer: Evidence from a service quality training program for German bank

clerks. *International Journal of Training and Development*, 12, 74-86.

doi:10.1111/j.1468-2419.2008.00296.x

Lohmann, R., & Lohmann, N. (2002). *Social administration*. New York, NY: Columbia University.

Mackeracher, D. (2008). *Making sense of adult learning* (2nd ed.). Buffalo, NY: University of Toronto Press.

Margaryan, A., Littlejohn, A., & Milligan, C. (2013). Self-regulated learning in the workplace: Strategies and factors in the attainment of learning goals.

International Journal of Training and Development, 17, 245-259.

doi:10.1111/ijtd.12013

Marsick, V., & Watkins, K. (2015). *Informal and incidental learning in the workplace*. New York, NY: Routledge.

Mason, M. (2010). Sample size and saturation in PHD studies using quantitative interviews. *Forum: Qualitative Sozialforschung/ Forum: Qualitative Social Research*, 11. Retrieved from <http://www.qualitative-research.net/index.php/fqs>

Maxwell, J. A. (2005). *Qualitative research design: An interactive approach*. Thousand Oaks, CA: Sage.

Maxell, J. A. (2012). *A realist approach for qualitative research*. Thousand Oaks, CA: Sage.

Maxwell, J. A. (2013). *Qualitative research design: An interactive approach* (3rd ed.). Thousand Oaks, CA: Sage.

Marshall, C., & Rossman, G. B. (2016). *Designing qualitative research* (6th ed.). Thousand Oaks, CA: Sage.

- McBride, D. (2010). *The process of research in psychology* (3rd ed.). Thousand Oaks, CA: Sage.
- McGregor, D. (1966). The human side of enterprise Douglas McGregor. *Reflections*, 2, 6-15.
- McGregor, D. (1960). *The human side of enterprise*. New York, NY: McGraw-Hill.
- McGuire, D. (2014). *Human resource development* (2nd ed.). Washington, DC: Sage.
- Merriam, S. B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco, CA: Jossey-Bass.
- Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation* (4th edition). San Francisco, CA: Wiley.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook* (2nd ed.). Thousand Oaks, CA: Sage.
- Miller, R. B., & Johnson, L. N. (2014). *Advanced methods in family therapy research, a focus on validity and change*. New York: NY: Routledge.
- Mizrahi, T., & Davis, L. E. (2008). *Encyclopedia of social work* (20th ed.). New York, NY: NASW and Oxford University.
- Mohanty, K., & Routray, P. (2010). *Human resource development and organizational effectiveness*. New Delhi, India: Excel.
- Mooney, H., Collie, W. A., Nicholson, S. W., & Sosulski, M. R. (2014). Collaborative approaches to undergraduate research training: Information literacy and data management. *Advances in Social Work*, 15, 368-389. Retrieved from <http://journals.iupui.edu/index.php/advancesinsocialwork/index>

- Morse, J. M. (2000). Determining sample size. *Qualitative Health Research, 10*, 3-5.
doi:10.1177/104973200129118183
- Mumford, E. (2015). *Qualitative research methods: A comprehensive guide for young researchers*. Retrieved from <https://www.amazon.com/Qualitative-Research-Methods-Comprehensive-Researchers-ebook/dp/B00SDT9WNQ>
- Murchison, J. M. (2010). *Ethnography essentials: Design, conducting, and presenting your research*. San Francisco, CA: John Wiley
- Nadel, M., Majewski, V., Sullivan-Cosetti, M., & Furuto, S. (2007). *Social work and service learning partnerships for social justice*. Lanham, MD: Rowman & Littlefield.
- Nadler, L., & Nadler, Z. (1990). *The handbook of human resource development* (2nd ed.). New York, NY: John Wiley & Sons.
- New book of knowledge. (2014, August 21). *Grolier Online*. Retrieved from <https://www.nypl.org/collections/articles-databases/grolier-online>
- Onwuegbuzie, A. J., & Leech, N. L. (2007). Sampling designs in qualitative research: Making the sampling process more public. *The Qualitative Report, 12*, 238-254.
Retrieved from <http://nsuworks.nova.edu/tqr/>
- O'Reilly, K. (2012). *Ethnographic methods* (2nd ed.). New York, NY: Routledge.
- Parrish, D. E., Harris, D., & Pritzker, S. (2013) Assessment of a service provider self-study method to promote interorganizational and community collaboration. *Social Work, 58*, 354-364. doi:10.1093/sw/swt039
- Parton, N. (2000). *Social theory, social change and social work, the state of welfare*. New York, NY: Routledge, Taylor & Francis Group.

- Patton, M. Q. (1990). *Qualitative evaluation and research methods*. Thousand Oaks, CA: Sage.
- Patton, M. Q. (2002). *Qualitative research & evaluation methods*. Thousand Oaks, CA: Sage.
- Pauk, W., & Owens, R. J. (2011). *How to study in college* (10th ed.). Boston, MA: Cengage Learning.
- Petch, A., Lightowler, C., Pattoni, L., & Watson, I. (2014). Embedding research into practice through innovation and creativity: A case study from social services. *Evidence & Policy, 10*, 555-564. doi:10.1332/174426414X14144247109334
- Peteet, J. R., & Balboni, M. J. (2013). Spirituality and religion in oncology. *A Cancer Journal for Clinicians*, doi: 10.1002/caac.21187
- Phillips, J. J., & Phillips, P. P. (2016). *Handbook of training evaluation and measurement methods* (4th ed.). New York, NY: Routledge.
- Picardi, C. A., & Masick, K. D. (2014). *Research methods, designing and conducting research with a real-world focus*. Thousand Oaks, CA: Sage.
- Pope, N. D., Loeffler, D. N., & Ferrell, D. L. (2014). Aging in rural Appalachia: Perspectives from geriatric social service professionals. *Advances in Social Work, 15*, 522-537. Retrieved from <http://journals.iupui.edu/index.php/advancesinsocialwork/index>
- Prescott, D. E. (2013). Social workers as experts in the family court system: Is evidence-based practice a missing link or host created knowledge. *Journal of Evidence-Based Social Work, 10*, 466-481. doi:10.1080/15433714.2012.759844

- Quinn, R. W., & Bunderson, J. S. (2016). Could we huddle on this project? Participant learning in newsroom conversations. *Journal of Management*, 2, 386-418.
doi:10.1177/0149206313484517
- Ravitch, S. M., & Riggan, M. (2017). *Reason & rigor, how conceptual frameworks guide research* (2nd ed.). Los Angeles, CA: Sage.
- Reeve, J. (2009). *Understanding motivation and emotion*. Boston, MA: John Wiley & Sons.
- Reisch, M., & Jarman-Rohde, L. (2000). The future of social work in the United States: Implications for field education. *Journal of Social Work Education*, 36, 201-214.
doi:10.1080/10437797.2000.10779002
- Reybold, L. E., Lammert, J. D., & Stribling, S. M. (2012). Participant selection as a conscious research method: Thinking forward and the deliberation of emergent findings. *Qualitative Research*, 13, 699 – 716.
- Richards-Schuster, K., Ruffolo, M. C., & Nicoll, K. L. (2015). Integrating social work into undergraduate education through a community action and social change multidisciplinary minor. *Journal of Social Work Education*, 51, 329-342.
doi:10.1080/10437797.2015.1012931
- Robbins, S. P. (2001). *Organizational behavior* (9th ed.). Hoboken, NJ: Prentice Hall.
- Roberts, A. R. (2009). *Social workers' desk reference*. New York, NY: Oxford University.
- Roby, J. L., Rotabi, K., & Bunkers, K. M. (2013). Social justice and intercountry adoptions: The role of the U.S. social work community. *Social Work*, 58, 295-303. doi:10.1093/sw/swt033

- Rosa, K. S. (Ed.). (2015). *American Library Association. The State of America's libraries 2015: A report from the American Library Association*. Retrieved from http://www.ala.org/news/sites/ala.org.news/files/content/0415_StateAmLib_0.pdf
- Ross, A. (2014). The social work voice: How could unions strengthen practice. *Aotearoa New Zealand Social Work*, 26, 4-13. Retrieved from <http://anzasw.nz/wp-content/uploads/SWR-Issue-26-4-Amy-Ross.pdf>
- Rothwell, W. J. (2008). *Adult learning basics*. Alexandria, VA: American Society for Training and Development.
- Rubin, H. J., & Rubin, I. S. (2012). *Qualitative interviewing: The art of data hearing*. Thousand Oaks, CA: Sage.
- Russ-Eft, D. (2002). A typology of training design and work environment factors affecting workplace learning and transfer. *Human Resource Development Review*, 1, 45-65. doi:10.1177/1534484302011003
- Ryan, T. P. (2013). *Sample size determination and power*. Evanston, IL: John Wiley.
- Saldona, J. (2013). *The coding manual for qualitative researchers* (2nd ed.). Washington, DC: Sage.
- Sale, A. U. (2009). Building the future workforce. *Community Care*, 1765, 16-16. Retrieved from <http://www.communitycare.co.uk/>
- Schwarz, N. (1999). Self-reports: How the questions shape the answers. *American Psychologist*, 54, 93-105. doi:10.1037/0003-066X.54.2.93
- Scott, G. G. (2011). *The researcher's bible*: Oakland, CA: Changemakers.
- Shirky, C. (2011). The political power of social media: Technology, the public sphere, and political change. *Foreign Affairs*. Retrieved from <http://sites.asiasociety.org/>

womenleaders/wp-content/uploads/2010/05/The-Political-Power-of-Social-Media-Foreign-Affairs2.pdf

Simon, J. S., & Donovan, J. T. (2001). *The five life stages of nonprofit organizations, where you are, where you're going, and what to expect when you get there*. Saint Paul, MN: Wilder.

Simons, K., Bonifas, R., & Gammonley, D. (2011). Commitment of licensed social workers to aging practice. *Health & Social Work, 36*, 183-195.
doi:10.1093/hsw/36.3.183

Singleton, R. A., & Straits, B. C. (2005). *Approaches to social research* (4th ed.). New York, NY: Oxford University.

Shear, M. D., & Schmidt, M. S. (2013, September 16). Gunman and 12 victims killed in shooting at D.C. Navy Yard. *New York Times*, p. A1. Retrieved from <http://www.nytimes.com/>

Skerrett, D. (2000). Social work-a shifting paradigm. *Journal of Social Work Practice, 14*, 63-73. doi:10.1080/02650530050043746

Sofu, F. (1999). *Human resource development, perspectives, roles and practice choices*. Woodslane, Australia: Business & Professional Publishing.

Sokolowski, R. (2000). *Introduction to phenomenology*. New York, NY: Cambridge University.

Stake, R. E. (1995). *The art of case study*. Thousand Oaks, CA: Sage.

Stroh, D. P. (2015). *Systems thinking for social change: A practical guide to solving complex problems, avoiding unintended consequences, and achieving lasting results*. White River Junction, VT: Chelsea Green.

- Summers, N. (2010). *Managing social services staff for excellence*. Somerset, NJ. John Wiley & Sons.
- Sunstein, B. S., & Chiseri-Strater, E. (2012). *Field: Reading and writing research* (4th ed.). Boston: MA: Bedford.
- Susskind, R., & Susskind, D. (2015). *The future of the professions: How technology will transform the work of human experts*. Oxford, UK: Oxford University Press.
- Swanson, R. A., & Holton, E. F. (2009). *Foundations of human resource development* (2nd ed.). San Francisco, CA: Berrett-Koehler.
- Sweifach, J., Linzer, N., & LaPorte, H. H. (2012). A social worker's duty to care: The self-other dimension of disaster response traumatology. *Traumatology, 19*, 3-10.
doi:10.1177/1534765612441977
- Thompson, P., & Yeung, P. (2015). Is a funeral a right? Exploring indigent funerals from social work perspectives. *Aotearoa New Zealand Social Work, 27*, 73-86.
Retrieved from <http://anzasw.nz/wp-content/uploads/Issue-27-1and2-Articles-Thompson-and-Yeung.pdf>
- Thurmond, V. A. (2001). The point of triangulation. *Journal of Nursing Scholarship, 33*, 253-258. doi:10.1111/j.1547-5069.2001.00253.x
- Trevithick, P. (2014). Humanising managerialism: Intuition, the relationship, and knowledge and skills in social work. *Journal of Social Work Practice, 28*, 287-311. doi:10.1080/02650533.2014.926868
- U.S. Census Bureau. (2013). *American Community Survey (ACS): Comparing 2013 American Community Survey data*. Washington, DC. Retrieved from

<https://www.census.gov/programs-surveys/acs/guidance/comparing-acs-data/2013.html>

- U.S. Department of Labor. (2010). *Occupational outlook handbook*. Washington, DC: Bureau of Labor Statistics.
- Van Teijlingen, E. R., & Hundley, V. (2001). *The importance of pilot studies (social research update)*. Surrey, England: University of Surrey.
- Wagner, H. L. (2008). *Barack Obama: Politician* (Black Americans of achievement). New York, NY: Chelsea House.
- Walter, J., Lechner, C., & Kellermanns, F. W. (2016). Learning activities, exploration, and the performance of strategic initiatives. *Journal of Management*, 42, 769-802.
doi:10.1177/0149206313506463
- Wermeling, L. (2013). Why social workers leave the profession: Understanding the profession and workforce. *Administration in Social Work*, 37, 329-339.
doi:10.1080/03643107.2012.693057
- Werner, J. M., & DeSimone, R. L. (2009). *Human resource development*. Mason, OH: South-Western Cengage Learning.
- Wesley, C., Tunney, K., & Duncan, E. (2004). Educational needs of hospice social workers: Spiritual assessment and interventions with diverse populations. *American Journal of Hospice & Palliative Care*, 21, 40-46.
doi:10.1177/104990910402100110
- West-Dunk, P. (2013). *How to be a social worker: A critical guide for students*. New York, NY: Palgrave.

- White, V., & Harris, J. (Eds.). (2001). *Developing good practice in community care: Partnership and participation*. London, United Kingdom: Jessica Kingsley Publishers.
- Wilson, G. (2013). Building partnerships in social work education: Towards achieving collaborative advantage for employees and universities. *Journal of Social Work, 14*, 3-22. doi:10.1177/1468017313475547
- Yin, R. K. (1994). *Case study research: Design and methods*. Thousand Oaks, CA: Sage.
- Yin, R. K. (2005). *Introducing the world of education: A case study reader*. Thousand Oaks, CA: Sage.
- Yin, R. K. (2009). *Case study research: Design and methods* (4th ed.). Thousand Oaks, CA: Sage.
- Yin, R. K. (2010). *Qualitative research from start to finish*. New York, NY: Guilford.
- Yin, R. K. (2011). *Qualitative research from start to finish*. New York, NY: Guilford.
- Yin, R. K. (2012). *Applications of case study research*. Washington, DC: Sage.
- Zeisset, R. M. (2009). *Statistics and measurement, an introduction*. Gainesville, FL: Center for Applications of Psychological Type.
- Zelnick, J. R., Slayter, E., Flanzbaum, B., Butler, N. G., Domingo, B., Perlstein, J., & Trust, C. (2013). Part of the job? Workplace violence in Massachusetts social service agencies. *Health & Social Work, 38*, 75-85. doi:10.1093/hsw/hlt007
- Zumbo, B. D., & Chan, E. K. H. (2014). *Validity and validation in social, behavioral, and health sciences*. New York, NY: Springer.

Appendix A: Walden University's Institutional Review Board Approval Letter

Original E-mail

From : IRB [IRB@waldenu.edu]

Date : 08/14/2013 12:44 PM

To : "cbarn001@waldenu.edu" [cbarn001@waldenu.edu]

CC : "joseph.barbeau@waldenu.edu" [joseph.barbeau@waldenu.edu], Walden University Research
[research@waldenu.edu]

Subject : Notification of Approval to Conduct Research-Cynthia Barnes

Dear Ms. Barnes,

This email confirms receipt of the letter of cooperation for the community research partner and also serves as your notification that Walden University has approved BOTH your dissertation proposal and your application to the Institutional Review Board. As such, you are approved by Walden University to conduct research.

Please contact the Office of Student Research Administration at research@waldenu.edu if you have any questions.

Congratulations!

Jenny Sherer
Associate Director, Office of Research Ethics and Compliance

Leilani Endicott
IRB Chair, Walden University

Appendix B: Introductory Letter to Potential Site Official

I am a doctoral student at Walden University and would like to conduct a study of your organization to explore how learning is transferred after employees have attended training. Your organization has been identified because of its social service responsibilities.

The approach will be a case study where a total of 15 employees (managers, training specialists, and human resource development specialists) are needed to participate. Participants will be interviewed separately for approximately 45-minutes to one hour at their place of business.

To participate, employees should have worked in a social service organization for at least five to six years and have the following:

(1) Expert working knowledge of the importance social service organizations play in society as exhibited by having or held a position of manager, training specialist, or human resource development specialist in a social service organization, (2) knowledge of the various types of training offered to employees, (3) an advisor's role in training or (4) facilitated training for the organization.

Information obtained will be kept confidential and used to add to the body of knowledge. Participants will not be exposed to harm, physical or psychological. Risks and burdens will be minimal and no more than experienced in normal, professional settings.

Please confirm your organization's availability to participate with an email message (_____) or a telephone call. I can be reached during the day at _____ or in the evenings at _____.

Appendix C: Letter of Permission to Conduct Study

Prince George's County
Department of Social Services

Gloria L. Brown
Director



Walter L. Rouse III
County Executive

Gloria L. Brown
Director
Prince George's County
Department of Social Services
805 Brightseat Rd.
Landover, MD 20785

August 5, 2013

Dear Ms. Barnes,

Based on my review of your research proposal, I give permission for you to conduct the study entitled, *Learning Transfer in a Social Service Organization: A Case Study within the Prince George's County Department of Social Services*. As part of this study, I authorize you to conduct interview sessions. Individual participation will be voluntary and at the discretion of staff.

We understand that our organizations' responsibilities include: providing an arena for you to solicit staff to voluntarily participate in your research project and providing a space for you to conduct your interviews for 2 weeks beginning at the end of August 2013.

I confirm that I am authorized to approve research in this setting.

I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the research team without permission from the Walden University IRB.

We request a copy of the research product at the conclusion of this project.

Sincerely,



Gloria L. Brown
Director



Martin O'Malley, Governor Anthony G. Brown, Lieutenant Governor Theodore Dalles, Secretary
805 Brightseat Road, Landover, MD 20785-4723 • 301-204-5000 • TTY: 1-800-735-2258 • www.princegeorgescountymd.gov

"Strengthening Families and Building Communities"

Appendix D: Title Designation and Transcript for Accuracy

Thank you for the opportunity to interview you. Provided is a written account of our exchange. You will note in the upper left-hand corner of the paper your designation of Manager, TS (training specialist) or HRD (human resource development specialist) and your numerical code.

The manager designation is self-explanatory. Your designation is TS if you shared that you have trained others or are currently providing training to others. On the other hand, if you indicated a responsibility to help employees stay abreast of changes, your designation is HRD.

If your understanding of the information we discussed is different, please send me an email message by October 21, 2013. I will respond immediately. If you agree with what is provided, nothing is required.

It has been a pleasure to work with you and thank you again for sharing information. As a token of my appreciation, your book of choice will be ordered and will reach you very soon. Once my dissertation has been finalized, you will receive a copy of the summary. It has been an honor to have worked with you.

Attachment

Appendix E: Consent Form

You are invited to take part in a research study of learning transfer in a social service organization. You were chosen for the study because you are a manager, training specialist, or a human resource development specialist working in a social service organization and have done so for five to six years. This form is part of a process called informed consent to help you understand more about this study prior to determining whether or not to participate.

This study is being conducted by Cynthia A. Barnes, a researcher and doctoral student at Walden University.

Background Information:

The purpose of this study is to explore how employees of a social service organization transfer learning into the organization after receiving training.

Procedures:

If you agree to participate in this study, you will be asked to:

- Review a list of days and times most appropriate to be interviewed. If the days and times listed are not convenient, identify two alternative days and times.
- Participate in a face-to-face interview with the researcher for 45-minutes to one hour to answer questions regarding training.
- Review the researcher's notes for accuracy

Voluntary Nature of the Study:

Your participation in this study is voluntary. This means that your decision of whether or not to participate will be respected. If you decide to join the study now, you may change your mind during the study. If you feel stressed during the study you may stop at any time. You may skip any questions you believe are too personal.

Risks and Benefits of Being in the Study:

The research risks and burdens are minimal and no more than experienced in normal, professional settings. The benefits for participating in the study include: adding your information to the body of knowledge and receiving a summary of the researcher's dissertation when completed.

Compensation:

Participants will not receive monetary compensation; however, a book from a selection of three will be given as a token of appreciation.

Confidentiality:

Any information provided will be kept confidential. Data will be maintained in a personal computer. Your name will be removed once the researcher obtains a doctoral degree. After that, data will be printed from the computer and maintained in a personal locked file cabinet for five years. After the fifth year, the data will be shredded and discarded. The researcher will not use your information for any purpose outside of this research project. Also, the researcher will not include your name or anything else that could identify you in any reports of the study.

Contacts and Questions:

You may ask any questions about the study. If you have questions later, you may contact the researcher via email at _____ or by cell at _____. If you want to talk privately about your rights as a participant, you may call _____. She is the Walden University representative who can discuss this with you. Her phone number is _____, extension _____. Walden University's approval number for this study is **IRB will enter approval number here** and it expires on **IRB will enter expiration date**.

The researcher will give you a copy of this form to keep.

Statement of Consent:

I have read the above information and I feel I understand the study well enough to make a decision about my involvement. By signing below, I am agreeing to the terms described above.

Printed Name of Participant _____

Date of consent _____

Participant's Written or Electronic* Signature _____

Researcher's Written or Electronic* Signature _____

Electronic signatures are regulated by the Uniform Electronic Transactions Act.

Legally, an "electronic signature" can be the person's typed name, their email address, or any other identifying marker. An electronic signature is just as valid as a written signature as long as both parties have agreed to conduct the transaction electronically.

Appendix F: Interview Schedule

September 2013						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12 Participant 770 Participant 772 Participant 771	13 Participant 773 Participant 775 Participant 774	14
15	16 Participant 776	17	18	19	20	21
22	23 Participant 777	24	25 Participant 778	26	27	28
29	30 Participant 779 Participant 780 Participant 781 Participant 782	Notes:				

October 2013						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21 Participant 783	22	23	24	25	26
27	28	29	30	31	Notes:	

Appendix G: Consent Form (Pilot)

This is an invitation to participate in a pilot of an interview instrument for validation purposes. You have been invited to participate in this pilot because you have been a manager, training specialist, or a human resource development specialist in an organization and are known from a network of individuals in the training and social service arena through professional acquaintances, attendance at school, and former work places. This form is part of a process called informed consent to help you understand more about this pilot prior to determining whether or not to participate. This pilot is being conducted by Cynthia A. Barnes, a researcher and doctoral student at Walden University.

Background Information:

The goal of this pilot is to obtain insight, identify words that might be confusing, and to make certain that the information is understandable.

Procedures:

If you agree to participate in this pilot, you will be asked to:

- Review a list of interview questions.
- Identify a day most appropriate to review the instrument. It is estimated that the review will take appropriately 30 minutes.
- Provide your comments directly on the instrument or verbalize your questions and concerns directly to the researcher to capture.

Voluntary Nature of the Study:

Your participation in this pilot is voluntary. This means that your decision of whether or not to participate will be respected. If you decide to participate in the pilot, you may change your mind while reviewing the instrument. If you feel stressed during the pilot you may stop at any time.

Risks and Benefits of Being in the Study:

Risks are minimal and no more than experienced in a normal, professional setting. The benefit for participating in this pilot consists of ensuring that the interview instrument is effectively worded to capture data to further the understanding of learning transfer in a social service organization.

Compensation:

Participants will not receive monetary compensation, but a thank you for time and information.

Confidentiality:

The researcher will not use your information for any purpose outside of this pilot. Also, the researcher will not include your name or anything that could identify you in this pilot.

Contacts and Questions:

You may ask any questions about the pilot. If you have questions later, you may contact the researcher via email at _____ or by cell at _____. If you want to talk privately about your rights as a participant, you may call _____. She is the Walden University representative who can discuss this with you. Her phone number is _____, extension _____.

_____. Walden University's approval number for this pilot is _____ and it expires on _____.

The researcher will give you a copy of this form to keep.

Statement of Consent:

I have read the above information and I feel I understand the pilot well enough to make a decision about my involvement. By signing below, I am agreeing to the terms described above.

Printed Name of Participant

Date of consent

Participant's Written or Electronic* Signature

Researcher's Written or Electronic* Signature

Electronic signatures are regulated by the Uniform Electronic Transactions Act. Legally, an "electronic signature" can be the person's typed name, their email address, or any other identifying marker. An electronic signature is just as valid as a written signature as long as both parties have agreed to conduct the transaction electronically.

Appendix H: Research Questions and Interview Questions

Research Questions	Interview Questions
1 How do managers, training specialists, and human resource development specialists familiarize employees with learning transfer expectations?	1. What determines approval of training?
	2. How do you familiarize employees with learning transfer expectations?
	3. Explain how you prepare employees for training?
	4. How often do you usually meet?
	5. How do you align training with the mission of your organization?
1a. What factors or conditions address the learning transfer function or activity?	6. How do you interact with colleagues and stakeholders to address training needs that would benefit employees?
	7. How often is this done: quarterly, annually, or on an as needed basis?
	8. How do you determine training opportunities to offer employees in your organization?
1b. In the event there is not a learning transfer initiative or instructions, how do employees integrate what was acquired in training to the organization?	9. When you meet with employees after training, what written guidance do you discuss?
	10. What are some of the things employees share?
	11. What practice does your organization have in place to process information gained as a result of

	employee training?
2. How do managers, training specialists, and human resource development specialists use learning acquired from employees who attend training?	12. In what way do you share information with colleagues knowledge gained from employees who attend training?
	13. How often do you meet with colleagues to collaborate on training issues to ensure that the organization benefits?
	14. How often do you meet with stakeholders to collaborate on training based on societal needs?

Appendix I: Concepts

← Theme 1: Expectations for Learning →

	PIN	Frequency	A	B	C
Relevance to the job	770,779,780,781	4	1	1	2
Money (funding)	772	2	1	0	1
Need	774	1	0	0	1
Opportunity	775	1	1	0	0
Employee determines	771,776,777,778,782	5	2	2	1
Supervisor	773	1	0	0	1

	PIN	Frequency	A	B	C
Review report	770	1	1	0	0
No formal structure	771,773,782	3	1	1	1
Discussion	772,775,777,779,780	6	1	1	4
Information; handouts	774,778	2	0	1	1
Unit meeting	776	1	1	0	0
Application	781	1	0	0	1

on job					
--------	--	--	--	--	--

	PIN	Frequency	A	B	C
Knowing employee	770,776	2	2	0	0
Take questions; cases	771,772,773	3	0	1	2
Nothing; do not	774,780,782	3	1	0	2
Appearance	775	1	1	0	0
Review what is offered	777,778,779,783	4	1	3	1
Inform clients	781	1	0	0	1

	PIN	Frequency	A	B	C
Set time	770,773,775,777, 778,779,780,782	8	3	3	2
No time	771,772,774, 781	5	1	1	3
Ongoing	783	1	1	0	0
	PIN	Frequency	A	B	C

Training	770,771,772,776,777, 778,779,782	8	3	4	1
No mission	773	1	0	0	1
Speakers	775	1	0	0	0
Clients	780	1	0	0	1
MD CHESSIE	781	1	0	0	1
Complete test	774	1	0	0	1
Forward link	783	1	1	0	0

← Theme 2: Involvement of Others →

	PIN	Frequency	A	B	C
Nothing	771,778,781	3		2	1
Talk; suggest	772,777,782, 783	4	2	0	2
Meet with colleagues	773, 774	2	0	0	2
Ask professionals; community	775	1	1	0	0
Train others; share	770,776,779,780	4	2	1	1
	PIN	Frequency	A	B	C

To happen	770	1	1	0	0
Nothing	771,772,773,774,775,780,781,782	8	2	1	5
Ad hoc	776	1	1	0	0
Do not talk	777,778	2	0	1	1
Two months	779	1	0	1	0
Ongoing	783	1	1	0	0

	PIN	Frequency	A	B	C
Match needs	770,775, 783	3	3	0	0
Provide suggestions	771	1	0	1	0
Do not do	772	1	0	0	1
Colleagues	776	1	1	0	0
MD CHESSIE	777	1	0	0	1
UMSS	778,779,780,781, 782,773,774	7	1	2	4

← Theme 3: Information Integration →

	PIN	Frequency	A	B	C
To happen	770	1	1	0	0
Nothing	771,772,773,774,775	11	2	3	6

	5,777,778,779,780,781,782				
Ask, develop handouts	776	1	1	0	0
Administrative	783	1	1	0	0

	PIN	Frequency	A	B	C
CQI	770	1	1	0	0
Suggestion	771	1	0	1	0
Nothing	772, 783	2	1	0	1
Good, bad, etc.	773,775	2	1	0	1
Cases	774	1	0	0	1
Learned	776	1	1	0	0
Needs	777	1	0	0	1
Handouts, referrals	778,780,781,782	4	1	1	2
Techniques	779	1	0	1	0

	PIN	Frequency	A	B	C
SOP	770	1	1	0	0
Nothing	771,772,773,774,77	11	3	2	6

	5,776,777,779,780, 781,782				
Bureau	778	1	0	1	0
Integrated	783	1	1	0	0

← Consistent Collaboration →

	PIN	Frequency	A	B	C
Train the trainer	770	1	1	0	0
Informally	771,773,775,776,77 9,783	6	2	3	1
Unit	772	1	0	0	1
Information; telephone	774,777,778,780, 781,782	6	1	1	4

	PIN	Frequency	A	B	C
When needed	770,772,776,782	4	3	0	1
Do not	771,774,777,780	4	0	1	3
Rarely	773	1	0	0	1
Quarterly	775,778,779	3	1	2	0
Daily	781	1	0	0	1
Twice a year	783	1	1	0	0

	PIN	Frequency	A	B	C
Monthly CQI	770,777,781	3	1	0	2
Nothing	771,774,778	3	0	2	1
Do not	772,776	2	1	0	1
Weekly	773	1	0	0	1
As needed	775,782	2	2	0	0
DHR	779	1	0	1	0
Supervisor	780	1	0	0	1
Quarterly	783	1	1	0	0

Appendix J: Themes

Theme 1: Expectations for Learning

- Employee determines
- Discussions
- Review of what is offered
- Set time
- Training

Theme 2: Involvement of Others

- Train others; share
- Nothing
- Review University of Maryland School of Social Work

Theme 3: Information Integration

- Nothing
- Handouts; referrals
- Nothing

Theme 4: Consistent Collaboration

- Informally; information; telephone
- When needed; do not
- Monthly CQI; nothing

Appendix K: Instrument

1. What determines approval of training?
2. How do you familiarize employees with learning transfer expectations?
3. Explain how you prepare employees for training?
4. How often do you usually meet?
5. How do you align training with the mission of your organization?
6. How do you interact with colleagues and stakeholders to address training needs that would benefit employees?
 7. How often is this done: quarterly, annually, or on an as needed basis?
 8. How do you determine training opportunities to offer employees in your organization?
 9. When you meet with employees after training, what written guidance do you discuss?
 10. What are some of the things employees share?
 11. What practice does your organization have in place to process information gained as a result of employee training?
 12. In what way do you share information with colleagues gained from employees who attend training?
 13. How often do you meet with colleagues to collaborate on training issues to ensure that the organization benefits?
 14. How often do you meet with stakeholders to collaborate on training based on societal needs?

Appendix L: Request Collection

Section I

Name of Potential Participant (Please print):

Email Address: _____

Work Telephone Number:
_____Book of Choice, see attachment:

Section II

Tear off this section for your records

Name: Cynthia A. Barnes

Email Address:

Telephone Number:

Rework
By Jason Fried (Author), David Heinemeier Hansson
(Author)

Rework Hardcopy

Switch Switch: How to Change Things When Change is Hard Hardcopy by Chip Heath
(Author), Dan Heath (Author)

The Happiness Project

The Happiness Project: Gretchen Rubin

Rework Hardcover

By Jason Fried (Author) David Heinemeier Hansson
(Author)

Most business books give you the same old advice: Write a business plan, study the competition, seek investors, yadda yadda. If you're looking for a book like that, put this one back on the shelf.

Rework shows you a better, faster, easier way to succeed in business. Read it and you'll know why plans are actually harmful, why you don't need outside investors, and why you're better off ignoring the competition. The truth is, you need less than you think. You don't need to be a workaholic. You don't need to staff up. You don't need to waste time on paperwork or meetings. You don't even need an office. Those are all just excuses.

Switch: How to Change Things When Change is Hard Hardcover by Chip Heath (Author) Dan Heath (Author)

Why is it so hard to make lasting changes in our companies, in our communities, and in our own lives?

The primary obstacle is a conflict that's built into our brains, say Chip and Dan Heath, authors of the critically acclaimed bestseller *Made to Stick*. Psychologists have discovered that our minds are ruled by two different systems – the rational mind and the emotional mind – that compete or control. The rational mind wants a great beach body; the emotional mind wants that Oreo cookie. The rational mind wants to change something at work; the emotional mind loves the comfort of the existing routine. This tension can doom a change effort – but if it is overcome, change can come quickly.

In *Switch*, the Heaths show how everyday people – employees and managers, parents and nurses – have united both minds and, as a result, achieved dramatic results.

The Happiness Project. Gretchen Rubin had an epiphany one rainy afternoon in the unlikeliest of places: a city bus. “The days are long, but the years are short,” she realized. “Time is passing, and I’m not focusing enough on the things that really matter.” In that moment, she decided to dedicate a year to her happiness project. In this lively and compelling account, Rubin chronicles her adventures during the twelve months she spent test-diving the wisdom of the ages, current scientific research, and lessons from popular culture about how to be happier. Among other things, she found that novelty and challenge are powerful sources of happiness; that money can help buy happiness, when spent wisely; that outer order contributes to inner calm; and that the very smallest of changes can make the biggest difference.