A 50th anniversary is a time for celebration and reflection. In recognizing *The Journal of Continuing Education in Nursing*’s 50th anniversary, I am reflecting on the changes I have experienced in continuing education and appreciating those forward-thinking professionals who have advanced the field.

Continuing education (CE) in nursing has a specific meaning regarding a carefully planned and formally approved learning activity. Wise nurse leaders have promoted the expectation of ongoing learning to maintain professional competency. That broad goal of ongoing learning is what connects me faithfully to the process of CE. I’m an enthusiastic learner and educator.

I first took on the role of a CE planner and provider as a clinical educator in a large medical center. Sometimes, quite a large gap existed between the careful planning and documentation I completed for an approved CE event and the somewhat more slapdash process I used for informal internal education events. Yet, both proved valuable.

In the 1980s, I wrote an article for my hospital newsletter about the challenges of planning education sessions for the nursing staff who worked on seven different shifts (7 a.m. to 3 p.m., 3 p.m. to 11 p.m., 11 p.m. to 7 a.m., 7 a.m. to 7 p.m., 7 p.m. to 7 a.m., 3 a.m. to 3 p.m., and 3 p.m. to 3 a.m.). Most of the plans then involved my appearing on every shift multiple times to teach skills and evaluate return demonstration checkoffs. At that time, even making an educational video recording required heroic amounts of equipment and time. And the real danger was that once I made a video recording (using 8-mm film or VHS tape!), it might be available for checkout from the hospital library for the next 15 years. Just getting a word processing program for educators to use in making conference handouts and overhead transparencies was a big deal—one requiring special permission from the hospital administrators.

These days, the richness of educational resources astounds me. I can have face-to-face discussions with learners and colleagues anywhere in the world. I can search for, purchase, participate in, and complete a just-in-time learning module online. I can assign learners to observe complex surgeries and access health databases online. I can use high-fidelity simulations and virtual reality as learning activities and to assess competency.

I value the vast learning resources we have, and I wonder what comes next. What should we be developing right now to support nurses’ continuing competency 50 years from now?

Note. Readers may access a collection of this and other 50th anniversary guest editorials, along with classic articles and American Nurses Association landmark statements, online for free during our 50th anniversary year, at https://www.healio.com/nursing/journals/jcen/50th-anniversary-collection.