

Final Phases in the Development and Implementation of the North American Certification Project (NACP)

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Abstract

In 2008 the North American Certification Project (NACP) completed a 7-year long process of developing a professional level certification program for child and youth care practitioners. This is the first effort in the United States to define the full range of knowledge, skills and attributes necessary for fully professional practice across child and youth care practice environments. The work was carried out by over 100 practitioners, administrators and educators from across North America. It included defining the field of practice, creating a five domain taxonomy of competencies, and creating an assessment methodology that included a scenario-based exam, supervisor assessments and an electronic portfolio coupled with submission of education/experience, references and documentation of specific training in required competency domains. Pilot testing of the certification program was conducted on 775 practitioners from multiple practice environments drawn from 26 sites in 9 states and 2 Canadian provinces. The program was revised based on consumer experience, research and recommendations from the NACP committee and was implemented nationally in March 2008. The program is expected to provide a platform for addressing child care workforce development, unifying credentialing and education, increasing regulatory standards and increasing public awareness of the contributions of the child and youth care profession.

Key Words: certification, child and youth care, competence assessment, workforce development, competencies, certification program, professionalism, and childcare.

North American Certification Project Overview

The Child Welfare League of America (CWLA), Annie E. Casey Foundation, Alliance for Children and Families (ACF), American Public Human Services Association (APHSA), National Staff Development and Training Association (NSDTA), National Association of Public Child Welfare Administrators (NAPCWA), Forum for Youth Investment, Children's Defense Fund (CDF), National Association of Social Worker (NASW), many universities and others have undertaken initiatives to study and address the workforce crisis that exists in the child welfare field. Studies and reports by a variety of these groups have documented that the single most significant factor limiting child and youth care services is the availability of competent, well-prepared practitioners to staff programs.

Over the past 7 years (2000–2007) the Association for Child and Youth Care Practice, the national organization that promotes professional child and youth care practice in the United States, brought together a significant international group of child and youth care professionals to study and address the workforce crisis. This group, known as the North American Certification Project (NACP), focused on the development of a full professional certification. This included the full range of knowledge, skills and attributes considered to be necessary for fully professional practice across practice environments. This focus was chosen to demonstrate the inter-relatedness of the various settings in which work is delivered, to describe the fundamental principles that underlie child and youth care practice, and to create a description of a fully functioning child and youth care professional. To accomplish this end, the NACP defined the field of child and youth care practice, described the requisite knowledge and skills necessary for professional practice and established a method to assess competence. This is a key step in the evolution of the Child and Youth Care field and an important contribution to addressing the workforce crisis.

It is expected that this work will provide guidance in the development of future training and education programs better suited to address the needs of communities, employers, practitioners and the workforce in general. It will also provide a framework for unifying the many existing educational and credentialing efforts currently underway to create a unified education and credentialing system in the United States.

The North American Certification Project concluded the pilot testing of the full professional certification program in February 2008. The revised certification program was implemented nationally in March 2008. These events mark a significant development in the establishment of a nationally recognized credential that spans the entire field of child and youth care. This is the first time a national certification has been offered at this level in the United States that is sanctioned by the professional child and youth care community and offers practitioners a credential that spans practice settings.

The credentialing program is based on well-researched knowledge and skill competencies that prepare practitioners for employment in multiple practice settings including: early care and education, community-based child and youth development programs, parent education and family support, school-based programs, community mental health, group homes, residential centers, day and residential treatment, early intervention, home-based care and treatment, psychiatric centers, rehabilitation programs, pediatric health care, and juvenile justice programs. The compilation and analysis of competencies drawn from 87 sources is the most extensive analysis conducted to date.

Competence demonstration is based on multiple assessment methods including an electronic portfolio, supervisor assessments, and a passing score on a scenario-based exam coupled with submission of professional references, professional memberships, employment history, education and extensive training documentation.

The pilot testing research was conducted by Dale Curry at Kent State University. The research effort focused on establishing the reliability and validity of the 100 item

scenario-based exam. Information was also collected on the usability and appropriateness of the application forms, supervisor assessment, reference forms and electronic portfolio.

The purpose of this paper is to describe the final phases involved in the North American Certification Project, the pilot testing program, and the revision and implementation of the full professional certification program. The paper is divided into the following sections: Program Integration, Pilot Testing, Post Pilot Testing Research and Revision, Application Processing, Recommendations, and National Implementation. Each section describes the key activities undertaken during that phase of the project. A bibliography and appendices are included (A: Concurrent Planning Committee Recommendations; B: Pilot Testing Certification Requirements; C: Current Certification Requirements; D: CYCCB Board of Directors; E: NACP Contributors: Committees and Membership).

Program Integration

The work of the NACP was carried out over a 7-year period in regionally dispersed sites by a volunteer group of over 100 practitioners, administrators and educators. The work was coordinated by committee chairs who reported to the ACYCP Board through the President. Most work was carried out through teleconference meetings with face-to-face meetings held only when required by the demands of the task. This model allowed work to move forward relatively independently by the key committees which included: Competency Group, Certification Process, Assessment, and Bylaws Committees.

The Competency Group conducted an analysis of existing child and youth care knowledge and skills competencies to determine commonalities and developed a framework for competency-based professional practice. This included reviewing 87 sources and led to the adoption of a current description of the field of child and youth care, the guiding principles of the NACP (inclusion, credibility, generic standards, reciprocity, and ethics), levels of certification needed (entry, first full professional and advanced levels), and a 5-domain taxonomy (Professionalism, Applied Human Development, Relationship and Communication, Developmental Practice Methods, and Cultural and Human Diversity) that uniquely describes the foundational attitudes, knowledge, and skill competencies of a fully professional child and youth care practitioner across practice environments. This committee's work was completed relatively early in the NACP process and served as a foundation for the work of other committees. The work of this committee is fully described in the North American Certification Project (NACP): Competencies for Professional Child and Youth Work Practitioners (Mattingly, Stuart, & VanderVen, 2002).

The Certification Process Committee designed the certification requirements and application process. This involved collecting and reviewing information describing a significant number of existing certification programs in the US and Canada to assess the key elements included and analyze each relative to the needs of the NACP full professional certification effort. This led to the adoption of a certification process that included a requirement for a baccalaureate degree (waived during the 7-year

grandfathering period 2006-2012), passing a competency-based exam, documentation of 250 hours of training specific to the five competency domains, submission of two supervisor assessments, two professional references and a portfolio, 2-5 years of practice experience (depending on educational attainment and field placement experience) and membership in a relevant professional organization.

The Assessment Committee developed an assessment strategy that included a scenario-based examination, supervisor assessment and a portfolio. This was, arguably, the most difficult aspect involved in the development of the certification program. Much time was spent in researching the best method for assessing child and youth care knowledge and skills, in sorting the competencies as to which assessment method would be most useful (examination, supervisor assessment or portfolio), and ultimately in writing the 19 scenarios and 100 questions included in the draft exam (based on scenarios submitted from the field). The program developed by the committee assesses every knowledge and skill competency by at least one method and uses multiple assessment methods for a significant number of competencies. It offers a very thorough competence assessment process based on best current practices in the field of assessment. The development of the overall assessment strategy is described more fully in *The Promise of Professionalism Arrives in Practice: Progress on the North American Certification Project*. (Mattingly & Thomas, 2004).

The Bylaws Committee designed the organizational documents for the incorporation of NACP as a stand-alone non-profit organization. The ACYCP Board agreed early in the NACP process that the certification program would ultimately be implemented by an organization created specifically to oversee the certification effort. The Bylaws Committee undertook writing the constitution and bylaws for the Child and Youth Care Certification Board.

Although by early 2005 a massive amount of work had been accomplished and all of the NACP committees had completed their work, no plan existed for the implementation of the pilot testing effort or for the implementation of the certification program nationally. On November 14, 2005 the ACYCP Board of Directors established the Concurrent Planning Committee to work with the NACP to develop and implement plans to complete the pilot testing and implementation of the NACP certification effort.

The committee was originally composed of Frank Eckles (Co-chair), Jean Carpenter-Williams (Co-chair), Sr. Madeleine Rybicki, Carol Kelly, and Martha Mattingly. The committee was subsequently expanded to include: Susan Wierzbicki, Carol Stuart, Dale Curry, David Thomas, Cindy Wilson, John Markoe, Karen VanderVen, Quinn Wilder, and Chip Bonsutto. Other contributors were brought into the committee's work when additional expertise was needed. (For a full listing of NACP contributors, see Appendix E.)

The Concurrent Planning Committee members met over the two year and three month period primarily through teleconference calls. Email was used extensively between

meetings to share documents, comments and revisions. Meeting minutes were recorded and distributed within the committee membership.

The committee began its work by assessing each of the components necessary for implementation of the pilot testing program. The certification program was developed over a 5-year period by four committees each working relatively independently. Over the period of development, changes made by some committees had not been fully integrated into the work of other committees. The Concurrent Planning Committee reviewed the recommendations from all of the committees and resolved any differences.

No documented plan existed for the implementation of the pilot testing program. Considerable time was spent in working out the plan and creating the necessary forms, surveys, releases, agreements, protocols and processes. Dale Curry, Kent State University, replaced David Thomas as the principle investigator for the project. The pilot testing research plan was submitted to the Kent State Internal Review Board and subsequently approved.

The committee reviewed the certification requirements and three different sets of requirements were approved. The full set of requirements was reduced to encourage broad participation in the pilot testing effort. One set of requirements was used for pilot testing participants in general, another set was used for participants completing the full set of certification requirements (including portfolio and expanded supervisor assessment) and a third set was used for practitioners who could not be fairly tested due to their extensive knowledge of the testing program. For a full listing of requirements, see Appendix B.

A strategy was developed to manage the security and confidentiality of the exams and forms submitted by test takers and practitioners applying for certification. Tracking and accounting for the massive number of forms and documents involved in the research effort was significant. Test booklets were shipped between test sites and large numbers of supervisor assessments, releases, answer sheets, and other forms had to be tracked, accounted for and ultimately stored. A tracking database was created, filing systems developed and a secure shipping system implemented. An audit conducted in December 2007 found that few materials were unaccounted for. This was an amazing accomplishment given the complexity of the effort and the need to move materials all over North America.

The entire draft exam (100 items and 19 case studies) was reviewed by several expert panels that made suggestions regarding readability and ethnic, gender and practice setting bias. In addition, the panel members reviewed each test item to determine if it adequately addressed the designated competency area. Revisions were made to the items and case studies based on the recommendations. One panel that consisted of assessment team members along with additional expert members made a final determination of the most correct answer for each item using a Modified Angoff procedure. Following these reviews and revisions, the exam was completely reformatted and 195 exams and 10,000 forms were printed and distributed to the testing sites.

Additional survey and data collection forms were developed to expand the information collected during the pilot testing effort. Three surveys were created to collect feedback from applicants on the use of the application form, supervisor assessment and electronic portfolio. A biographical data sheet and exam feedback form were developed to capture demographic information on test takers and to solicit opinion regarding the external validity of the exam, comments on the test items and test participants experiences. All of these forms were implemented as part of the pilot testing effort.

Extensive work was undertaken on the portfolio to create an electronic version that was user friendly and electronically transmittable. An additional supervisor assessment was developed to collect targeted data upon which to base a comparison of test scores and supervisor ratings of test takers.

In 2002–2003 a request for proposals to serve as national test sites was conducted by ACYCP. This proved problematic when the timeline for implementation of the pilot testing program was extended. The six groups that submitted proposals (Janus, City Year, Good Shepherd Center, Chimney Rock Center, Holy Family Social Services and Allendale Association) were recontacted. Only two of the sites were still interested in participating as test sites. A plan was developed to create test sites regionally across the United States and Canada.

Agreements were signed with 19 sites with each site agreeing to provide testing facilities, to pay travel for testing teams, to allow access to their staff and supervisors and to distribute information locally to increase the number of people tested at each site and to increase the diversity of practice settings included in the testing. Testing was also conducted in an additional 7 sites. Although an effort was made to offer testing in all regions of the United States, most testing was conducted in Ohio, Texas, Pennsylvania, and Wisconsin (with smaller groups tested in Ontario and British Columbia, Canada; Maryland and Oklahoma).

The following organizations served as pilot testing sites: **Avondale Youth Center**, Zanesville, OH (Gerald Brandt, Executive Director); **Berea Children and Family Services**, Berea, OH (Diane Matthews, Group Home Coordinator, Richard Frank, President, & Joan Silva, Asst. Vice President); **Bryan's House**, Dallas, TX (David Thomas, Executive Director); **Catholic Charities Parmadale**, Parma, OH (Chip Bonsutto, Asst. Executive Director & CPO); **Central Texas Youth Services**, Belton, TX (Keith Wallace, Executive Director); **Child Care Group**, Dallas, TX (Susan Hoff, Executive Director); **Cowichan Intercultural Society**, Duncan, British Columbia, Canada (Martin Breuhan, Executive Director); **Child and Youth Care Work Certification Institute**, College Station, TX (Frank Eckles, Executive Director); **Family and Children's Services**, Tulsa, OK (Whitney Downie, Director of Community Services); **Flat Rock Care Center**, Flat Rock, OH; **Greene County Children's Services**, Dayton, OH (Tony Rodgers, Group Home Supervisor); **Holy Family Institute**, Pittsburgh, PA (Sr. Rita Fanning, President; Virginia Flaherty, Executive Director; Larry McKinney, Special Services Administrator, Kim Radler, Human Resources Director, Liz

Foz, Human Resource Assistant & Vic Papale, Vice President & COO); **Hudson Youth Development Center**, Hudson, OH (Jose Delgado, Superintendent); **Jentry McDonald**, Baltimore, MD (Cassandra McDonald, Executive Director); **Kinder Emergency Shelter (Harris County Children's Protective Services)**, Houston, TX (Robert Brewer, Director); **Lifeworks**, Austin, TX (Steve Bewsey, Director of Housing and Homeless Services); **Lutheran Homes Society**, Toledo, OH (Karen Blackmon, Program Administrator and Harry Blackmon, Executive Director); **Mahoning County Children's Services**, Youngstown, OH; **Norris Adolescent Center**, Mukwonago, WI (Don Harris, Executive Director); **Oesterlen Services for Youth**, Springfield, OH (David Jackson, Training Coordinator & Donald Warner, Executive Director); **Ryerson University**, Toronto, Ontario, Canada (Carol Stuart, Director, School of Child and Youth Care); **Safely Home**, Maple Heights, OH (George Purgert, Executive Director); **St. Mary's Villa**, Amblin and Pittsburgh, PA (Diana Fryer, Executive Director & Suzanne Snyder, Administrative Assistant); **St. Michael's Academy**, College Station, TX (Jennifer Wiginton, Program Coordinator); and the **University of Pittsburgh**, Pittsburgh, PA (Martha Mattingly, Professor Emeritus).

A description of the testing procedure was developed and approved to ensure that all test-takers would have a similar testing experience. All testing was proctored by at least one of thirteen proctors who were trained in the procedures agreed upon for conducting testing. Each proctor signed an agreement confirming their understanding of the testing procedure and their responsibility in maintaining test security and confidentiality of test-taker information.

On March 31, 2006 the committee began disseminating information about the pilot testing program and began signing up pilot test sites. In four months the Concurrent Planning Committee completed the development process undertaken over the previous 5-year period and established a viable plan for implementing the pilot testing program.

Pilot Testing

Between May and August 2006, a total of 775 practitioners were tested at 29 sites in 6 states (Maryland, Pennsylvania, Ohio, Oklahoma, Texas and Wisconsin) and 2 Canadian provinces (Ontario & British Columbia). Practitioners were drawn from all of the major practice settings in the field of child and youth care (early childhood education, treatment, after-school, corrections, disabilities, foster care, residential, community youth services, etc.).

Specially designed supervisor assessments were collected from 699 test takers (90% of the total tested). Biographical data sheets, answer forms, consent and feedback forms were collected from almost 100% of the participants.

Post Pilot Testing Research and Revision

Dale Curry at Kent State University conducted the test analysis research from September through December 2006. Consultation and research assistance was also provided by Basil Qaqish of the University of North Carolina.

Based on the responses of the exam participants, a variety of analyses were conducted to improve the exam including:

1. Content analysis of examinee comments and suggestions for improvement/revision. Comments were organized for review by item and case.
2. Analysis of item reliability and difficulty and how well items differentiate between those who are more or less proficient.
3. Analysis of items that had different response rates for various groups (e.g., gender and race).
4. Examination of the extent that child and youth care practitioners view the exam as relevant to child and youth work across the various practice settings.

The exam scores were also correlated with the examinees' supervisor ratings of their performance/competence on-the-job. Those with higher exam scores were rated by their supervisors as being more competent child and youth care practitioners. Significant differences were found in all five competency domains (Professionalism, Cultural and Human Diversity, Applied Human Development, Relationship and Communication, Developmental Practice Methods) as well as in overall performance.

The pilot testing research is extensively described in *A National Certification Exam for Child and Youth Care Workers: Preliminary Results of a Validation Study* (Curry, Qaqish, Carpenter-Williams, Eckles, Mattingly, Stuart, & Thomas, 2009).

Based on the extensive reliability and validity analyses, a sub-committee of the assessment team composed of Dale Curry, David Thomas, Carol Stuart and Frank Eckles met in Dallas (February 2007) and made final revisions to the exam items and case studies. A total of 75 items and 17 case studies were selected for inclusion in the final exam. Following the revision, the exam was completely reformatted and reorganized to improve readability.

Also during this phase, an expert panel determined the cut score (minimum passing score) for the exam using a Modified Angoff procedure. This criterion-referenced approach is one of the most commonly used methods of determining a pass point for licensure and certification exams.

The test booklets used during the pilot testing program were either returned to the office and destroyed or destroyed by a proctor (195 were printed: 181 test booklets were destroyed; 12 were retained for research purposes; 2 booklets were not accounted for and are presumed to have been accidentally discarded).

Certification Application Processing

Application processing began in January 2007. Applications were reviewed by a committee of assessors who coordinated their work through teleconference meetings. This included verification of employment/experience, assessment of submitted education and training documentation, and approval of supervisor assessments and references. All applications were approved by the full committee. The committee included: Martha Mattingly, Sr. Madeleine Rybicki, Cindy Wilson, Chip Bonsutto, Frank Eckles, Quinn Wilder, April Johnson, and Ashley Oberst. A log was kept documenting all processing decisions to assure that past practices were fairly available to all applicants. Letters were sent to applicants when documentation was missing. Copies of these letters were included in the applicant's file. All application processing by the Concurrent Planning Committee was completed by January 31st, 2008.

Participants in the pilot testing program were given up to a year and a month to submit their applications. The final deadline for application submission was August 31st, 2007. As of 2/4/08, 277 (35.7% of total number tested) certification applications were received and 219 (79% of total submitted) practitioners certified. The remaining 58 (20.9% of total submitted) applications were not complete and were placed on "Inactive Status" (no further communication sent out by the office). These applications were transferred to the Child and Youth Care Certification Board (CYCCB) at the end of February 2008 and could be reactivated by the applicant for up to 6 months by sending in the requested documentation or payment. After that time, the files were closed and the applicant required to resubmit their application and meet all of the certification requirements in force at the time of submission. As of 12/31/2008 a total of 241 certifications had been issued (87% of the total submitted).

Postcard notices were periodically sent to pilot test participants to encourage their completion of the program requirements. Notices were sent if a supervisor assessment or consent form were not submitted during testing. When all pilot testing forms were received a notice was sent confirming receipt. A notice was sent reminding participants of the time limits for submission of applications. A notice was sent confirming receipt of the certification application. And finally, certificates and letters of congratulation were sent when application packets were fully approved.

Portfolios were reviewed by Dale Curry, Carol Kelly, and Karen VanderVen. All portfolios submitted were approved by the committee. The committee made recommendations regarding the future use of the portfolio (included in the recommendations section). The implementation plan and agreements with test sites required that 10% of each test group complete the full set of certification requirements (including portfolio and expanded supervisor assessment). In return they were granted reductions in fees and an expanded period between renewals. This strategy was not successful in encouraging completion of the full set of certification requirements. Only 6 complete packets were received. This was not an adequate number of cases upon which to base a revision of the certification application, supervisor assessment and electronic portfolio.

Office management, program development, information dissemination, test administration, fee collection and application processing was coordinated and carried out by the Child and Youth Care Worker Certification Institute in Texas. Extensive documentation, accounting information, filing systems and databases were created to support the NACP pilot testing program. These were located in the Texas office and were transferred to CYCCB on March 1st, 2008.

Recommendations

The Concurrent Planning Committee met by teleconference several times in January 2008. In these meetings the committee reviewed the work of the NACP Pilot Testing effort and made formal recommendations to the ACYCP Board for revision of the certification and testing program. The recommendations were included in the Concurrent Planning Committee Final Report submitted to the ACYCP Board February 4, 2008. Upon acceptance of the report by the ACYCP Board, the committee's work was completed and the committee was officially disbanded. The recommendations are included in their entirety in Appendix A.

National Implementation

The entire certification program was revised based on research, consumer feedback and the recommendations of the Concurrent Planning Committee (for a full listing of current certification requirements, see Appendix C). The program was implemented March 1, 2008 by the Child and Youth Care Certification Board (CYCCB), a non-profit organization developed by ACYCP to oversee the implementation of the certification program. Services and operations were initially implemented in Ohio, Pennsylvania, Wisconsin, Texas, Louisiana, New England, Oklahoma, Illinois and Wyoming (states that participated in the certification pilot-testing program or where support for certification is relatively strong). Services will be expanded throughout the United States over a five-year start up period. The initial operations office is located in Texas at the Child and Youth Care Worker Certification Institute, but may be moved as the managing contractor changes.

In September 2008 the National Staff Development and Training Association (NSDTA), the training affiliate of the American Public Human Services Association (APHSA) awarded CYCCB the 2008 NSDTA Quality Award in recognition of the 7-year effort carried out by NACP to increase the standards of care for children and youth by developing and implementing a national child and youth care worker certification program.

CYCCB is a collaboration of practitioners, employers, and educators that seek to address critical needs of the workforce. Over the next five years (2008-2012) CYCCB will undertake the most comprehensive and widespread effort to date to address key issues that have previously limited the emergence of a well-prepared and stable workforce in the child and youth care field. This effort is expected to make a significant contribution to improving the developmental, educational, recreational, correctional, and treatment

programs available to children, youth and families in American communities. To accomplish this goal, CYCCB will provide leadership to: promote a unified vision of the field of practice, increase collaboration between stakeholders across practice environments, expand public awareness of the contribution of child and youth care practitioners, expand practitioner participation in advocacy, promote higher standards of practice, increase and coordinate research efforts, and explore the impact of system change on the workforce, employers and communities.

CYCCB is implementing the national professional certification program as a framework for understanding what a fully prepared practitioner knows and can do. It will establish wide access to testing services through agreements with training entities, universities, employers and the professional community. Over time, summit meetings will be held with key stakeholders to explore the benefits and challenges of creating an integrated education and credentialing system. Specific training in aligning competencies and assessment methods will be undertaken to support wider understanding of the characteristics and benefits of this integrated system.

CYCCB recognizes that success in unifying the field of practice will require a sustained effort to promote a unified professional vision. This infers a need to establish opportunities for collaboration across practice settings, stakeholders, and regional areas.

CYCCB will promote a collaborative environment that engenders cooperation, exploration of challenges and benefits of working together, and understanding of the field as a whole. The collaborative environment will seek to create a shared vision with shared resources and benefits. This vision will provide an important link for acting together for the benefit of all children, youth, families and the workforce.

CYCCB is implementing a revenue sharing program that will provide a model for distributing revenues and benefits through collaboration. Certification fees collected from practitioners will be shared with key stakeholders to provide funding for the emerging professional community and groups that share CYCCB's vision. As participation in credentialing expands, this revenue stream is expected to become a significant funding source to support organizations and programs that have, in the past, had difficulty finding funding to advance their contributions. Revenue sharing based on collaborative involvement is expected to increase motivation for working together.

CYCCB's Board is composed of representatives drawn from major practice settings, employers, credentialing organizations, professional associations, training providers and educators (see Appendix D for a full listing of Board members). Combined with the Advisory Committee and Advisory Network that expand this representation exponentially, and CYCCB's goal of unifying the field of practice, CYCCB is in a unique position to share information across a broad spectrum to promote mutual understanding and collaboration. CYCCB will be active in joining existing collaborations and establishing new collaborations to fill gaps. As this process moves forward, it is expected to increase contact between isolated groups and promote collaboration around a unified understanding of the field.

CYCCB will establish collaborations with other groups to pursue public policy initiatives to raise standards of practice. Maryland recently became the first state to mandate practitioner certification. Assuming that the evolution of the child and youth care field follows the example of other professions, participation by other states typically expands relatively rapidly once any state has stepped forward to lead the way. Accounts of abuse and neglect throughout the child care, foster care, mental health, residential and correctional systems has brought much public attention to the failings of the child care system. Many states have already increased standards while other states are poised to make changes. Workforce studies are highlighting the connection between the availability of quality child care services and economic impact on employers. There is an increasing consciousness that the child care system is not meeting community needs and action must be taken to improve it. Increasing regulatory standards is an approach often used.

CYCCB believes that as this movement is taking shape, it is important to promote regulation that takes into consideration the needs of the many stakeholders involved (i.e., children, youth, families, practitioners, employers and educators) and the workforce. State regulatory bodies tend to focus on safety with little understanding that a workforce well grounded in skillful practice is better able to meet the needs of children and youth and is, therefore, able to create safer environments. CYCCB will encourage regulators to increase requirements for training, education and credentialing. Raising these standards will provide the momentum needed to drive the expansion of training, education and credentialing programs that will serve to make career development accessible to the workforce.

CYCCB will establish a university-based research consortium that focuses on child and youth care workforce development. It will seek funding for research initiatives and work cooperatively with others to identify and carry out important workforce research. This consortium will create research initiatives, collaborate with others who sponsor research, and provide technical assistance to groups who need help designing and carrying out research. This will include efforts to validate and improve credentialing programs, document practitioner demographics, explore the impact of credentialing, document interest in and access to higher education and training, and identify methods for encouraging young people to pursue careers in child and youth care.

Collaborations of researchers will be formed to expand the expertise available to produce more scientifically rigorous studies. Coordination of research agendas will be undertaken to reduce redundancy of effort and wasted funding. Sharing of information, results and research opportunities will be coordinated to increase the scope of investigations and provide more useful results.

CYCCB recognizes the importance that advocacy plays in shaping perception and channeling resources. CYCCB, working through its collaborations, Advisory Committee and Advisory Network, will create a more integrated system for disseminating information and creating dialogue. It will create opportunities for practitioners and the

public to be involved in system change and to work with policy makers to identify solutions and improve services.

CYCCB promotes a vision of hope that working together: the public, practitioners, employers, and educators can create a system of child and youth care that will address current community needs and provide a foundation for future advancement.

The current workforce crisis cries out for serious and concerted efforts to address the current lack of common vision, standards and resources. The changes in the social fabric of American culture and the complexities of maintaining healthy children, youth and families demand that a unified approach emerge. Unless a new vision takes shape, the increasing needs of young people and communities will overwhelm society's ability to provide the developmental, educational and social support required. This portends serious consequences for a nation that needs its young people to create a foundation for its future in an increasingly competitive world. The children of today are the citizens of tomorrow. It is not an unreasonable expectation that the adults providing for their care and development create systems and approaches that will adequately support and prepare them.

Much work has been accomplished in each of the child and youth care field's practice areas to implement programs to meet community needs. A rich international literature has emerged describing child and youth care practices and approaches. The recent identification of positive youth development principles, solution-focused interventions and assets-based approaches hold great promise in advancing practice. A wealth of new approaches is making its way into the field. But this infers a field populated by practitioners who are educated in these approaches and skillful in the complexities of delivering these services, a field of practitioners who are engaged in child care longer than the average 18 months that most practitioners stay employed, a field where there is a future that extends beyond minimum wage and an early ceiling on advancement.

CYCCB is an effort by the child and youth care professional community to address these current workforce issues. CYCCB has chosen a collaborative approach that is expected to pull together key stakeholders and groups to identify ways to work together to address the overall needs of the workforce. CYCCB believes that the child and youth care profession and the United States have reached a moment where the contributions that the field offers will find acceptance and be valued. The need is clearly evident. CYCCB recognizes that as value for children, youth, families and the child and youth care profession increases, additional resources will become available. Central to CYCCB's effort is the recognition of the importance of families to American culture. They are the basic building block of American history. They are the promise of America's future.

Over the next 5 years, CYCCB working in collaboration with many other individuals and organizations, will put in place the systems and network of practitioners, volunteers and advisors necessary to elevate child and youth care practice and deliver on the promise to provide a competent, caring, and compassionate child care workforce to address the needs of America's communities.

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APPENDIX A

Recommendations from the Concurrent Planning Committee to the ACYCP Board

The Concurrent Planning Committee offers the following recommendations to the ACYCP Board of Directors as the NACP certification program is transitioned to the Child and Youth Care Worker Certification Board (CYCCB):

1. Extensive work was completed during the pilot testing program to create processes, protocols, agreements, forms, surveys and documents to support the certification system. These have all been revised based on the committee's experience and feedback offered by users of the system. This has been done in conjunction with CYCCB representatives. Although we expect that on-going development will be necessary, we believe that our revisions will offer CYCCB a firm basis upon which to implement the certification program generally in 2008.
2. Extensive documentation exists regarding application processing decisions that guided approval of certification packets during the pilot testing program. We encourage CYCCB to continue using these standards as a basis for application approval.
3. Inadequate survey data was collected on the consumers' experience in using the application forms, supervisor assessments, and electronic portfolio. We recommend that over the next year, this survey effort be continued. We suggest that surveys be appended to these forms and required as part of the certification program until an adequate sample exists upon which to base revision.
4. The requirements for recertification were not fully developed by previous committees. The Concurrent Planning Committee did not prioritize this issue until its final meeting on January 28, 2008. During the pilot testing program, information was disseminated to participants indicating that the period of renewal was expected to be 3 years but the exact requirements were still in development. We recommend that the following requirements be approved:
 - a. Recertification should be based on a 2-year period. Past experience with other certification efforts demonstrates that many practitioners will be lost by the system if the recertification period is too long.
 - b. Fees should be collected yearly to increase on-going contact between CYCCB and practitioners. We recommend a \$15 maintenance fee be collected the first year, followed by a \$35 recertification fee collected the second year (total cost for 2 years is \$50). For practitioners seeking to save time and money, an alternative program could be established whereby practitioners pay a \$45 fee the first year and are not assessed a fee when they submit their continuing education documentation on the second year.

- c. Recertification requirements will include:
 - i. Payment of fee
 - ii. Documentation of 15 clock hours per year (30 hours total) of continuing education relevant to the 5 competency domains in the certification program. We recommend limiting the submission of repetitive training (First Aid, CPR, Blood borne Pathogens, Crisis Intervention, etc.) by only allowing these to be submitted one time and by requiring that continuing education include training in at least 3 different content domains.
 - iii. Proof of individual membership in an approved professional organization. We recommend that approval be contingent on the organization having the following characteristics:
 - 1. relevant to and active in the CYC field
 - 2. representative of CYC professional interests
 - 3. offers individual membership to CYCs beneficial in the local area where the practitioner is living
 - 4. All CYC professional associations that are members of ACYCP should be given preference in the areas in which they offer services (Texas, Wyoming, Wisconsin, and Ohio)

We see benefit in also requiring organizations to actively support CYC professional certification and to offer a code of ethics but feel this will prove unrealistically limiting at this time.

- 5. We recommend that all certification applicants sign a form agreeing to use and support the Standards of Practice for North American CYC Professionals. This is expected to emerge as the umbrella ethics code in the field. We believe that the code can serve a useful purpose in enriching practice even for practitioners who subscribe to a code recognized in a specific practice arena (NAEYC, National Juvenile Detention Association, etc).
- 6. The portfolio needs additional development. The committee commends the people who developed it. It clearly offers an important opportunity to assess competence relevant in the certification effort and to stimulate thought regarding personal philosophies of practice. The electronic format offers much benefit to the submission and approval process. The current portfolio is not truly a compendium of demonstrative work collected over a period of time (as is typical of portfolios). The submissions that were reviewed did address the competencies but not to the extent that would be expected for someone credentialed at the full professional level. We recommend that further work be done to:
 - a. Articulate the purpose of the portfolio
 - b. Clarify the assessment grids
- 7. During the pilot testing program applications could be submitted up to one year following testing. We recommend that this time be reduced to 6 months. We see

little use to allowing submission up to one year. We recommend that the applicant be notified when the 6-month period has lapsed and be allowed to reactive their application for an additional 6 months (upon request and after paying a \$20 reactivation fee). After one year, the applicant should be required to retest.

8. Certificates were issued to all practitioners completing the certification process. These certificates were issued by NACP and ACYCP. The committee recommends that new certificates, each bearing a unique certificate number, be issued bearing the name and logo of CYCCB.

The committee Co-chairs would like to express thanks to the many volunteer committee members and others who donated the hundreds of hours that were needed to complete the project. This collaboration, spearheaded by ACYCP and its leadership, offers the CYC community important foundational work upon which to base future improvement of services to children, youth and families, and a fine example of the individual commitment and dedication that has driven the field forward since its inception.

Respectfully submitted,
Frank Eckles
Jean Carpenter-Williams
Committee Co-chairs
Concurrent Planning Committee

APPENDIX B

Three sets of Certification Requirements used during the Pilot Testing Program.

	Pilot Testing Requirements <i>(for practitioners pilot testing the exam only)</i>	Requirements for Practitioners with Extensive Knowledge of Testing Program	Full Certification Requirements <i>(for practitioners pilot testing the exam, application forms, supervisor assessment and portfolio)</i>
Fees	\$45 - \$55	\$75 - \$100	\$40 - \$45
Examination	Any score considered passing	Not tested	Any score considered passing
Education and Experience	<p><u>No degree</u> AND 10,000 hours (five years) of documented experience in direct youth/child care work. OR</p> <p>Completion of an <u>Associate Degree</u> from a regionally accredited college program AND 6,000 hours (three years) documented experience. OR</p> <p>Completion of <u>Baccalaureate Degree</u> from a regionally accredited college or university AND 4,000 hours (two years) documented experience. OR</p> <p>Completion of a <u>Masters Degree</u> from a regionally accredited college or university AND 2,000 hours (one year) documented experience.</p> <p>Completion of a <u>Canadian 2-year CYC diploma</u> from a regionally accredited college AND 6000 hours of documented experience including the internship/practicum/placement hours included in the diploma program. OR</p> <p>Completion of a <u>Canadian 3-year CYC diploma</u> from a regionally accredited college AND 5000 hours of</p>	No requirement	<p><u>No degree</u> AND 10,000 hours (five years) of documented experience in direct youth/child care work. OR</p> <p>Completion of an <u>Associate Degree</u> from a regionally accredited college program AND 6,000 hours (three years) documented experience. OR</p> <p>Completion of <u>Baccalaureate Degree</u> from a regionally accredited college or university AND 4,000 hours (two years) documented experience. OR</p> <p>Completion of a <u>Masters Degree</u> from a regionally accredited college or university AND 2,000 hours (one year) documented experience. OR</p> <p>Completion of a <u>Canadian 2-year CYC diploma</u> from a regionally accredited college AND 6000 hours of documented experience including the internship/practicum/placement hours included in the diploma program. OR</p> <p>Completion of a <u>Canadian 3-year CYC diploma</u> from a regionally accredited college AND 5000 hours of documented experience including the internship/practicum/placement hours included in the diploma program.</p>

	documented experience including the internship/practicum/placement hours included in the diploma program.		
	Pilot Testing Requirements	Requirements for Practitioners with Knowledge of Testing Program	Full Certification Requirements
References	Two (2) letters of reference from co-workers who have known the applicant for 6 months or longer. AND Completion of Pilot Test (short) Supervisor Assessment by a supervisory level person who has extensive, direct knowledge of the applicant's work with youth.	Authorized by ACYCP Board action	Two (2) letters of reference from co-workers who have known the applicant for 6 months or longer. AND Completion of Supervisor Assessment by a supervisory level person who has extensive, direct knowledge of the applicant's work with youth. AND Completion of Supervisor Assessment by a 2 nd supervisory level person who has extensive, direct knowledge of the applicant's work with youth.
Professional Membership	Not required	Membership in ACYCP included with application fee	Individual membership in a professional organization documented but not required.

Professional Training Requirement	Professionalism Minimum of 20 hours Cultural and Human Diversity Minimum of 20 hours Applied Human Development Minimum of 20 hours Relationship and Communication Minimum of 40 hours Developmental Practice Method Minimum of 80 hours Additional Training (not assigned to specific content domain) Maximum of 70 hours 250 Total hours required	Submission of professional resume	Professionalism Minimum of 20 hours Cultural and Human Diversity Minimum of 20 hours Applied Human Development Minimum of 20 hours Relationship and Communication Minimum of 40 hours Developmental Practice Methods Minimum of 80 hours Additional Training (not assigned to specific content domain) Maximum of 70 hours 250 Total hours required
Portfolio	Not required	Expressed in work carried out as part of NACP project	Completion required but portfolio approval not required
Surveys	Not required	Not required	Completion of application form, supervisor assessment and portfolio surveys required

Certification processing fees assessed and renewal periods granted during the Pilot Testing Program.

	Testing Site Group under 100	Testing Site Group over 100	Completion of full certification documentation packet
Staff member of organization sponsoring testing site	\$50 with renewal every 3 years	\$40 with renewal every 3 years	\$40 with renewal of certification waived for 6 years
Individuals not sponsored by testing site sponsor	\$55 with renewal every 3 years	\$45 with renewal every 3 years	\$45 with renewal waived for 6 years

APPENDIX C

Current Certification Requirements

<i>Area</i>	<i>Certification Requirements</i>
Fees	Testing Fee: \$75 Application Processing Fee: \$100
Examination	Must achieve passing score
Education and experience	<p><u>No degree</u> AND 10,000 hours (five years) of documented experience in direct youth/child care work.</p> <p>OR</p> <p>Completion of an <u>Associate Degree</u> from a regionally accredited college program AND 6,000 hours (three years) documented experience.</p> <p>OR</p> <p>Completion of <u>Baccalaureate Degree</u> from a regionally accredited college or university AND 4,000 hours (two years) documented experience.</p> <p>OR</p> <p>Completion of a <u>Masters Degree</u> from a regionally accredited college or university AND 2,000 hours (one year) documented experience.</p> <p>OR</p> <p>Completion of a <u>Canadian 2-year CYC diploma</u> from a regionally accredited college and 6000 hours of documented experience including the internship/practicum/placement hours included in the diploma program.</p> <p>OR</p> <p>Completion of a <u>Canadian 3-year CYC diploma</u> from a regionally accredited college and 5000 hours of documented experience including the internship/practicum/placement hours included in the diploma program.</p> <p><i>Note: Beginning January 1, 2012, completion of a baccalaureate degree will be the minimum educational requirement for certification at the professional level.</i></p>
References	<p>Two (2) letters of reference from co-workers who have known the applicant for 6 months or longer.</p> <p>AND</p> <p>Completion of Supervisor Assessment by a supervisory level person who has extensive, direct knowledge of the applicant's work with youth.</p> <p>AND</p> <p>Completion of Supervisor Assessment by a 2nd supervisory level person who has extensive, direct knowledge of the applicant's work with youth.</p>
Professional Membership	Individual membership in a professional organization recognized by CYCCB.
Professional Training Requirement	<p>Professionalism Minimum of 20 hours</p> <p>Cultural and Human Diversity Minimum of 20 hours</p> <p>Applied Human Development Minimum of 20 hours</p> <p>Relationship and Communication Minimum of 40 hours</p> <p>Developmental Practice Methods Minimum of 80 hours</p> <p>Additional Training (not assigned to specific content domain) Maximum of 70 hours</p>

	250 Total hours required with 100 hours received within the last 5 years
Portfolio	Satisfactory Completion required
Surveys	Completion of application form, supervisor assessment and portfolio surveys required

APPENDIX D

CYCCB Board of Directors

Frank Eckles, President

Executive Director, CYC Certification Institute
Board Member, Association for Child and Youth Care Practice
Board Member, Texas Youth and Child Care Worker Association
Training Director, Academy for Competent Youth Work
College Station, Texas

Sr. Madeleine Rybicki, First Vice President

Director of Training, Holy Family Institute
President, Academy of CYC Professionals
Board Member, Ohio Association of CYC Professionals
Board Member, Association for Child and Youth Care Practice
Pittsburgh, Pennsylvania

Cindy Carraway-Wilson, Second Vice President

Director of Training, New England Network for Child, Youth and Family Services
Director, Massachusetts Foundation for Children
Brunswick, Maine

Debbie Zwicky, Secretary

Board Member, Wisconsin Association of CYC Professionals
Chair, Wisconsin Certification Committee
Board Member, Association for Child and Youth Care Practice
Director of Quality Assurance and Program Development, St. Rose Youth & Family Center
Milwaukee, Wisconsin

Tony Rodgers, Treasurer

Board Member, Ohio Association of CYC Professionals
Chair, Ohio Certification Committee
Group Home Supervisor, Greene County Children Services
Xenia, Ohio

Chip Bonsutto, Board Member

President, Association for Child and Youth Care Practice
Assistant Executive Director and CPO, Catholic Charities Services Corporation
Parma, Ohio

Dale Curry, Board Member

Principle Investigator, North American Certification Project Pilot Testing Program
Associate Professor, Human Development and Family Studies, Kent State University
Board Member, National Staff Development and Training Association
Co-Editor, Journal of Child and Youth Care Work
Kent, Ohio

Michael Gaffley, Board Member

Board Member, Association for Child and Youth Care Practice
Program Director and Program Professor, Programs In Child and Youth Studies
Fishler School of Education and Human Services, NOVA Southeastern University
North Miami Beach, Florida

Andy Schneider-Munoz, Board Member

Vice President and Director, Academy for Educational Development, Center for Youth
Development and Policy Research
Board Member, Association for Child and Youth Care Practice
Board Member, Academy of Child and Youth Care Professionals
Co-Editor, Journal of Child and Youth Care Work
Washington, DC

Carol Stuart, Board Member

Associate Professor, School of Child and Youth Care, Ryerson University, Toronto, Ontario, Canada
Collaborator/Developer, Alberta Provincial CYC Certification Programs
Managing Editor, Relational Child and Youth Care Practice
Co-Chair, Task Force on Educational Accreditation-Canada

*One Board position is currently vacant and will be filled by a practitioner nominated from Juvenile
Corrections.*

APPENDIX E

NACP Contributors: Committees and Membership

NACP COMPETENCY GROUP

Conducted an analysis of existing child and youth care knowledge and skills competencies to determine commonalities and developed a framework for competency-based professional practice.

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Carla Kirby

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CERTIFICATION PROCESS COMMITTEE

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Child Welfare League of America

Lloyd Bullard

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Free State Challenge, Baltimore, MD

ASSESSMENT COMMITTEE

Developed an assessment strategy based on an examination, supervisor assessment and portfolio, and created the scenario-based examination.

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Jean Carpenter-Williams, NRCYS, Tulsa, Oklahoma

Dale Curry, Kent State University, Kent, Ohio

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Tammy Foster-Gray, Kinder Emergency Shelter, Houston, Texas

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John Markoe, Goodwill-Hinckley, Hinckley, Maine

Martha Mattingly, University of Pittsburgh, Pittsburgh, Pennsylvania

Carol Stuart, Ryerson University, Toronto, Canada

David Thomas, Bryan's House, Dallas, Texas

Toby Owen, All Church Home, Ft. Worth, Texas

Karen VanderVen, University of Pittsburgh, Pittsburgh, Pennsylvania

NACP BYLAWS COMMITTEE

Designed the organizational documents for the incorporation of NACP as a separate organization.

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Frank Eckles

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Final Phases in the Development and Implementation
of the North American Certification Project

Draft 1/1/2008

David Thomas

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PORTFOLIO COMMITTEE

Created the portfolio component of the assessment process.

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CONCURRENT PLANNING COMMITTEE

Completed development of the examination, integrated the work of the various committees, and implemented the pilot testing of the certification program.

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Jean Carpenter-Williams, Co-Chair

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SURVEY COMMITTEE

Developed surveys to collect information on the usability and appropriateness of the application process, supervisor assessment and portfolio.

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SUPERVISOR ASSESSMENT COMMITTEE

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BIAS REVIEW

Reviewed the examination for practice setting, cultural and racial bias and made recommendations for revision.

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EXPERT PANEL

Assisted with the establishment of the examination passing score.

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RESEARCHERS

Conducted research to determine the validity, reliability and bias of the examination.

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Basil Qaqish, Research Consultant

University of North Carolina at Greensboro.

TESTING TEAMS

Proctored test sites and coordinated testing. Two to three person teams conducted testing.

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Sr. Madeleine Rybicki

Holy Family Institute, Pittsburgh, PA (Sr. Madeleine was responsible for testing the largest number of individuals.)

Carol Stuart

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David Thomas

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Susan Wierzbicki

Free State Challenge Program, Baltimore, MD