



2010

Annual Report

LEGISLATIVE AUTHORITY

The State Board for the Certification of Residential Child Care Program Professionals (“Board”) operates under the provisions of Title 20 of the Health Occupations Article of the Annotated Code of Maryland. The Board is the certification authority for Residential Child Care Program Administrators (“RCCPAs”) and Residential Child and Youth Care Practitioners (“RCYCPs”).

The Board is mandated to protect children living in Maryland’s residential child care programs by certifying qualified RCCPAs and RCYCPs, establishing fees, maintaining a current roster of all certified individuals, administration of certification examinations, enforcing current statutes and regulations, adopting new regulations to carry out the provisions of the Title, suggesting changes to the Title to keep abreast of trends and issues, adopting standards of practice for the certification of RCCPAs and RCYCPs, verification of credentials, issuance of certificates, establishing requirements for and verification of continuing education, investigation of complaints based on alleged violations of regulations and statutes, and formal and informal disciplining of certified individuals. In Fiscal Year 2007, the Board became 100% general funded.

MISSION

The mission of the Board is to protect Maryland’s children living in residential child care programs and to promote quality of care in the field of residential child care through:

- 1) Certifying and regulating RCCPAs and RCYCPs;
- 2) Receiving and resolving complaints from the public, licensing authorities, courts, employers, insurance companies, other certificate holders regarding RCCPAs or RCYCPs who may have violated the practice act and its regulations; and,
- 3) Setting standards for residential child care that reflect new and emergent developments through regulations and legislation.

VISION

A State that provides qualified RCCPAs and RCYCPs to further the well-being of children living in Maryland’s residential child care programs.

Ensuring that Maryland’s children in residential child care programs are provided the best possible care.

BOARD COMPOSITION

The Board consists of 12 members, of which six are representatives appointed by the secretaries of the various State agencies involved in the licensing and monitoring of residential child care programs. These agencies include the Department of Health and Mental Hygiene’s Mental Hygiene Administration and Developmental Disabilities Administration, the Department of Human Resources, the Department of Juvenile Services, the Maryland State Department of Education, and the Governor’s Office for Children. The remaining six members are appointed by the Governor with advice of the Secretary of Health, of which three are RCCPAs, one is a RCYCP and two are consumers.

A consumer member may not:

- Be a RCCPA or RCYCP;
- Have a household member who is a RCCPA or RCYCP;
- Have had a household member who participates in commercial or professional field related to administering a residential child care program; and,
- Have had within the two-years before appointment substantial financial interest in a program regulated by the Department of Health and Mental Hygiene’s Mental Hygiene Administration or Development Disabilities Administration, Department of Human Resources, or Department of Juvenile Services.



BOARD MEMBERS

Albert Zachik, MD, Chair	MHA
Robin El-Amin, Vice Chair	Consumer
Bruce Anderson, Secretary	CRCCPA
Carmen Brown	DHR
Cheryl Brown	DJS
William Childers	RCYCP
Shanda Crowder	GOC
Krystal McKinney	CRCCPA
Mary Rode	CRCCPA
Steve Sorin	MSDE
Ada Pearl Thomas	Consumer
Sequaya Tasker	DDA

STAFF

The Board is staff by two part-time personnel consisting of an Executive Director and a Deputy Director. The Board's staff is responsible for the daily activities of the Board and the coordinator of administrative activities with other governmental agencies. In addition, the Board shares its legal, investigative, fiscal, and information technology staff with other health occupation boards under the auspices of the Department of Health and Mental Hygiene.

BOARD MEETINGS

The Board conducts public meetings on the second Friday of every month throughout the year. The dates, times, and place of meetings are published in the Maryland Register and posted on the Board's web site (www.dhmv.state.md.us/crccp) and in its newsletter.

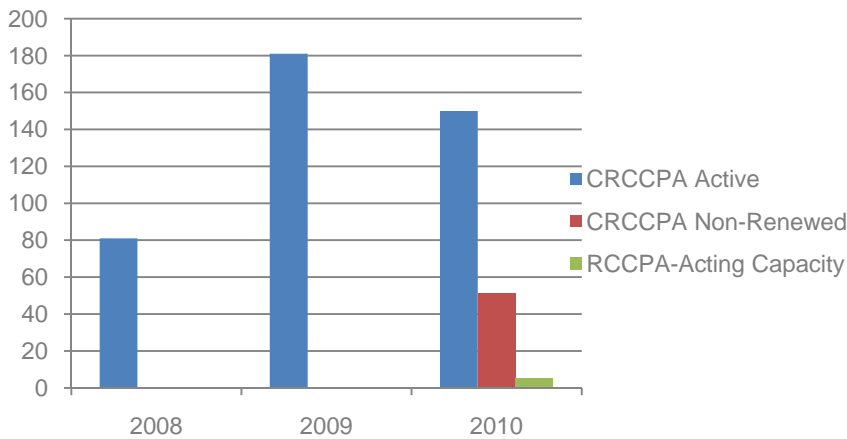
2010 BOARD MEETINGS

March 12	April 9	May 14	June 11
July 9	September 10	October 8	December 10

BOARD ACTIVITIES

RESIDENTIAL CHILD CARE PROGRAM ADMINISTRATOR CERTIFICATION. The Board implemented the certification program for Residential Child Care Program Administrators in Fiscal Year 2007. Chart 1 notes the number of individuals who have active certification, not renewed their certification, and approved for acting capacity. CY 2010 marked the first renewal cycle for CRCCPAs.

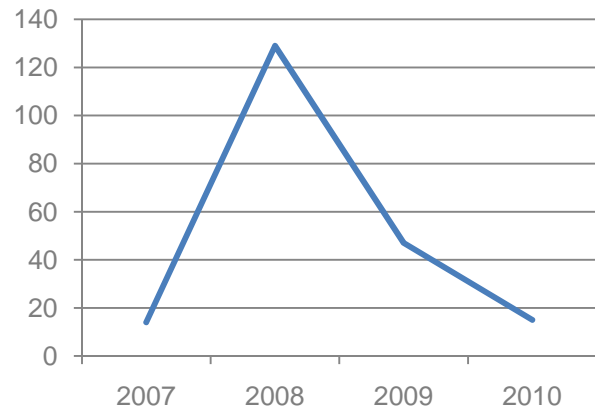
Chart 1. Active Certification, Non-Renewed and Acting Capacity Approval



There are various reasons why some CRCCPAs chose not to renew including, but not limited to the closure of the residential child care program where the individual was employed or to a change in the field in which the individual is employed to one that does not require certification. This type of attrition is somewhat typical in professional licensure programs.

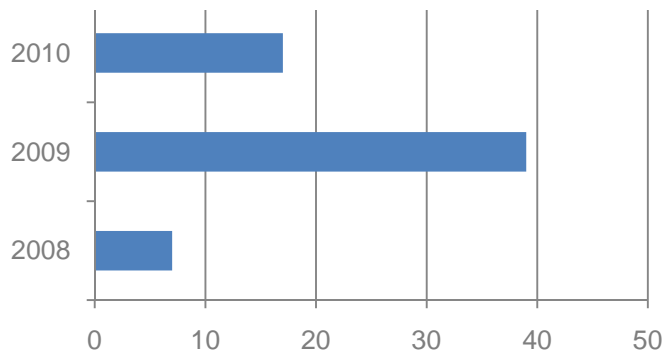
The Board also notes a decline in the number of new individuals seeking certification as Residential Child Care Program Administrators. The Board believes that this trend will change over the next few years. It is anticipated that the number of individuals seeking certification as Residential Child Care Program Administrators will increase because of the cost effectiveness for residential child care programs to develop Practitioner-in-Training for their direct care staff to meet the requirements for certification as Residential Child and Youth Care Practitioners.

Chart 2. Newly CRCCPAs (2007 – 2010)



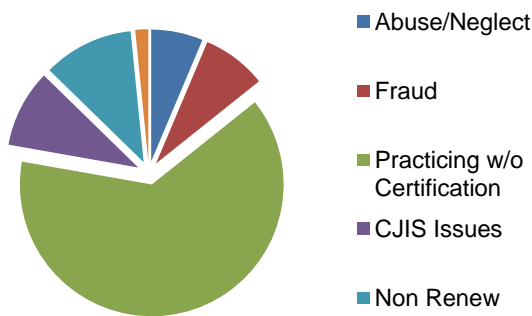
COMPLAINTS AND DISCIPLINARY ACTION. Chart 3 notes the number of complaints that the Board has received for each year from 2008-2010. The complaints cover a broad range of categories from abuse/neglect to practicing without being certified. (See Chart 4.)

Chart 3. Number of Complaints Received (2008 – 2010)



The vast majority of the cases concerned individuals who were practicing as a Residential Child Care Program Administrator without being certified. In most cases, the Board was able to resolve the matter by bringing the individual into requirements; or by working with licensing authorities for residential child care programs to ensure the term “program administrator” was being used correctly. In other cases, the Board issued Cease and Desist, Letters of Agreement, or entered into Consent Agreements pursuant to Case Resolution Conferences.

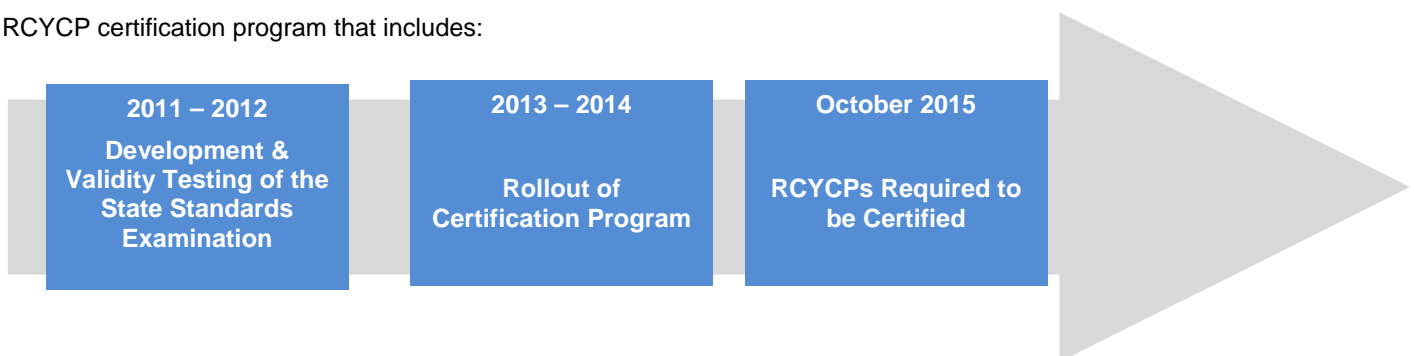
Chart 4. Categories of Complaints



RESIDENTIAL CHILD & YOUTH CARE PRACTITIONERS. The Board’s purview was expanded in 2008 to include the certification of direct care workers by October 2015. RCYCPs are individuals who are assigned to perform the direct responsibilities related to activities of daily living, self-help, and socialization skills in a residential child care program under the direction of a CRCCPA.

(Note: Residential Child Care Programs licensed by the Department of Health and Mental Hygiene’s Developmental Disabilities Administration or those Residential Child Care Programs identified in COMAR 14.31.06.02C are EXEMPT from the certification requirement.)

Implementation of RCYCP Certification Program. The Board has developed a timeline for the implementation of the RCYCP certification program that includes:



Requirements for Certification. There are five options by which to become certified or approved to practice as a RCYCP. The requirements to be certified as a RCYCP include:

	FULL	PROVISIONAL	PRACTITIONER-IN-TRAINING
Education or Training	<p>Option 1. AA or BA/BS Degree</p> <p>Option 2. HS/GED & Completion of an Approved Training Course</p> <p>Option 3. HS/GED & Sponsorship</p>	<p>Option 4. AA or BA/BS</p> <p><i>Allows an individual to work pending passing the State Standards Examination</i></p> <p><i>(Similar to Acting Capacity for RCCPAs)</i></p>	<p>Option 5. HS/GED & Enrolled in:</p> <p>(1) An Approved Training Course</p> <p><i>(Evidenced by official transcript noting completion of 3 credit hours or 45 contact hours);</i></p> <p>Or</p> <p>(2) Apprentice Program with an Authorized Preceptor</p> <p><i>(An apprentice program is a training program that is developed by the RCCP.)</i></p>
Human Service	If by Sponsorship, 2 years	No	No
Standards Examination	Yes	No	No
Age	21 years old or older; or At least 18 years old and have earned at least an associate's or bachelor's degree from an accredited college or university.		
RESTRICTIONS ON PRACTICE			
	None	<ul style="list-style-type: none"> • No more than 10% of the program's direct care staff may have provisional certification. • May not supervise direct care staff. • Must be under the supervision of a CRCCPA or CRCYCP. • Valid for 180-days. • Non-renewable. 	<ul style="list-style-type: none"> • May not provide supervision to direct care staff. • Must be under the supervision of a CRCCPA or CRCYCP. • 1:10 preceptor ratio. • No more than 30% of direct care staff may have PIT certification. • Non-renewable.

¹ The State Board may grant a 1 year extension pending the completion by the PIT of an approved training program.

Requirements to be a Preceptor. In order for a residential child care program to operate a Practitioner-in-Training program the program must have at least one authorized Preceptor. A CRCCPA must apply to the Board to become approved as a Preceptor. In order to apply the individual must:

- Submit a complete application.
- Execute an affidavit that the training program sufficiently covers the ten core competency areas identified in COMAR 10.57.03.04B(2). (See Appendix 1.)
- Be a CRCCPA in good standing with the Board for two-years or longer.
- Employed as a CRCCPA for three-years or longer as evidenced by a letter from the Residential Child Care Program.
- Residential child care program has not been or is not currently subject to disciplinary action by the program's licensing authority.

The CRCCPA may or may not be the program administrator of record for the Residential Child Care Program, but the Preceptor may not be the program administrator of record for a Residential Child Care Program other than the one designated for training.

Responsibilities of a Preceptor. A Preceptor must determine the appropriate amount and type of supervision necessary, taking into consideration: (a) skills, experience, and education of the individual; (b) change in the child's or youth's status; (c) complexity of assigned duty, and (d) any other factors deemed appropriate by the supervising individual. The Board requires that the Preceptor to submit to the Board a progress report every 180-days.



ACCOMPLISHMENTS FOR 2010

The Board continues to make significant progress in fulfilling its mission and meeting key milestones. Highlights of the Board's achievements are outlined below.

- Implemented revised regulations;
- Completed revisions of the Board's database to accommodate the RYCPC certification program;
- Fostered the development of continuing education opportunities for CRCCPAs;
- Pursued the development of the RYCPC State Standards Examination;
- Revised Board web site;
- Issued Winter and Summer newsletters;
- Participated in regional provider forums hosted by the Governor's Office for Children;
- Hired a Deputy Director;
- Purchased scanning/scoring software and hardware for RYCPC State Standards Examination; and,
- Advocated for additional resources to implement the RYCPC certification program.

CHALLENGES FOR 2011

The Board supports professionalizing the role of direct care workers in residential child care programs, but certification of this population cannot be properly implemented without additional resources. Given the current fiscal challenges facing Maryland, and the rest of the nation, it is unlikely that additional staff will be provided to the Board to implement the certification program for RCYCPs. Given this reality, the Board developed an implementation timeline that will allow existing staff enough time to appropriately implement the certification program. However, investments will be needed in computer hardware and software.

GOALS FOR 2011

The Board has established the following goals for 2011:

- Develop and validate the State Standards Examination for RCYCPs;
- Identify, in collaboration with licensing authorities, topics for educational alerts for CRCCPAs;
- Foster the development of continuing education opportunities for CRCCPAs;
- Issue Winter and Summer newsletters;
- Advocate for additional resources to implement RCYCP certification program; and,
- Educate CRCCPAs about the RCYCP certification program.

APPENDIX 1. CORE COMPETENCIES FOR RCYCPS

APPENDIX 1. CORE COMPETENCIES FOR RESIDENTIAL CHILD AND YOUTH CARE PRACTITIONERS

Core Competency Area 1 - Communication Skills

Skills/Functions

- Use positive communication skills as an interdisciplinary team member and as a communicator with children and families
- Provide consultation and actively participate in the continuum of service model
- Use effective, sensitive communication skills to build rapport with children and youth

Knowledge

- Principles and techniques related to positive and effective communication strategies and skills

Skills/Functions

- Apply principles of confidentiality and privacy by only sharing with others information needed to provide care for the child and family

Knowledge

- Confidentiality requirements

Skills/Functions

- Demonstrate the ability to interact effectively with co-workers, colleagues, clients, and their families.
- Demonstrate effective observation, documentation, and reporting skills.
- Maintain accurate records, collecting, compiling and evaluating data, and submitting records to appropriate sources in a timely manner

Knowledge

- Oral and written communication
- Requirements related to written and oral communication
- Incident Reporting Requirements

Core Competency Area 2 - Child and Adolescent Development

Skills/Functions

- Positively influence development through the appropriate use of verbal and non-verbal actions, words, tone of voice, dress and physical appearance

- Apply child development principles to practice by recognizing and responding to children and adolescents developmental differences

Knowledge

- Principles and milestones of child and adolescent development
- Psychosocial and emotional needs of children and youth

Skills/Functions

- Demonstrate an understanding of common childhood and adolescent stressors, effective coping mechanisms, common problems affecting development and mental health challenges and how to support an individuals' social and emotional development
- Demonstrate an awareness of basic life needs

Knowledge

- Characteristics of child and adolescent disorders
- Impact of the emotional and intellectual impact of loss, separation, and out-of-home placement
- Depression, suicide assessment and prevention
- Sexual acting out

- Family violence

- Basic life needs

Skills/Functions

- Demonstrate and understanding of major diagnoses and effective treatments of child and adolescent psychopathology

Knowledge

- Child and adolescent psychopathology

Knowledge

- Confidentiality requirements

Skills/Functions

- Demonstrate the ability to interact effectively with co-workers, colleagues, clients, and their families.
- Demonstrate effective observation, documentation, and reporting skills.
- Maintain accurate records, collecting, compiling and evaluating data, and submitting records to appropriate sources in a timely manner

Knowledge

- Oral and written communication
- Requirements related to written and oral communication
- Incident Reporting Requirements

Core Competency Area 3 - Cultural Competence

Skills/Functions

- Apply an understanding of cultural and religious differences and values and norms to practice
- Use appropriate communication skills and strategies to meet the cultural, religious, and linguistic diversity of children and families

- Adjust interactions for the effects of age, culture, background, experience and developmental status

- Designs, implements and individualizes interactions and plans to these differences

Knowledge

- Diversity and cultural differences in youth and families

Core Competency Area 4 - Family Partnerships

Skills/Functions

- Provide strength-based care that is child-focused and family-driven to meet the individual needs of families and children
- Apply holistic child approach to meet individual and family needs

Knowledge

- Child-focused and family-driven care

Skills/Functions

- Encourage optimism and jointly set realistic goals for the child and family

- Engage the family and child as a full partner in care planning, decision-making and practice

Knowledge

- The family as a partner in decision making and practice

Skills/Functions

- Apply an understanding of family values and norms to practice

Knowledge

- Ecological Systems Theories

Skills/Functions

- Use sensitive and appropriate responses to family experience
- Assist children and families with coping mechanisms to reduce trauma

- Apply holistic child approach to meet individual and family needs

Knowledge

- Sensitivity to family experience and trauma

- Child-focused and family-driven care

Skills/Functions

- Encourage optimism and jointly set realistic goals for the child and the family

- Engage the family as a full partner in care planning, decision-making and practice

Knowledge

- Family as partner in decision-making and practice

Core Competency Area 5 - Crisis Intervention and Behavior Management

Skills/Functions

- Understand and demonstrate the use of crisis prevention and intervention models
- Implement de-escalation techniques
- Demonstrate use of mediation and conflict resolution skills
- Identify, ameliorate, and manage serious behavior problems and related presenting conditions
- Demonstrate the ability to observe and report children's conduct, maturity of responses and expectations
- Share with children the behavior management in use, the rewards of appropriate behavior and the consequences of inappropriate behavior.

Knowledge

- Crisis prevention and intervention techniques, including mediation and conflict resolution

Skills/Functions

- Demonstrate appropriate interventions according to Maryland's seclusion and restraint regulations
- Demonstrate appropriate interventions for AWOL situations and emergency situations

Knowledge

- Maryland's seclusion and restraint regulations
- Maryland's AWOL procedures
- Emergency preparedness

Core Competency Area 6 - Health and Safety

Skills/Functions

- Demonstrate knowledge of child health and safety regulations and maintenance of life skills
- Demonstrate knowledge of the risks to health and safety and the ability to facilitate a safe and secure environment
- Demonstrate how to identify and report allegations to ensure the safety of children, including incidences of abuse and neglect
- Demonstrate knowledge and awareness of physical environment
- Transport children and youth in a safe manner

Knowledge

- Regulatory requirements regarding health and safety
- Transportation safety

Skills/Functions

- Administers medications accurately and in accordance with policy and procedure (if applicable)

Knowledge

- Medication management and administration

Skills/Functions

- Observes and implements appropriate actions to promote healthy living and to prevent illness and accidents
- Observes and documents signs and symptoms of illness and medical needs

Knowledge

- Health and Wellness

Skills/Functions

- Apply appropriate CPR and First Aid techniques as necessary

Knowledge

- CPR and First Aid

Skills/Functions

- Demonstrate the understanding of child and adolescent maltreatment
- Demonstrate an understanding of definition of child abuse and neglect

- Comply with child abuse reporting procedures

Knowledge

- Maryland regulations on child abuse and neglect reporting

Core Competency Area 7 - Community Development Skills

Skills/Functions

- Identify the needs of the child, youth and family for community support and assist in gaining access to such supports

Knowledge

- Systems of care
- Community and service networking

Skills/Functions

- Demonstrate an ability to interact with the community as an advocate of the child, youth, and family.

- Demonstrate sensitivity to the needs and interest of the community.

Knowledge

- Advocacy
- Community Integration

Core Competency Area 8 - Therapeutic Child and Youth Care

Skills/Functions

- Demonstrates an understanding of what type and how much supervision is necessary and appropriate consistent with the client's age, emotional development and psychological needs

Knowledge

- Care and Supervision

Skills/Functions

- Promote child and adolescent participation and partnership in the design of services
- Assists and supports the client (according to developmental ability) to develop strategies and make informed choices
- Assists children and youth in understanding grievance procedures and client rights

Knowledge

- Child and youth empowerment
- Grievance procedures
- Client rights

Skills/Functions

- Demonstrates appropriate boundaries with children and youth
- Establish positive relationships with children and their families.
- Demonstrates knowledge of ethical issues and dilemmas faced in providing care and services to children and youth

Knowledge

- Professional Ethics
- Professional Boundaries

Core Competency Area 9 - Treatment Services and Quality Improvement

Skills/Functions

- Demonstrates an understanding of various treatment modalities
- Collaborate with team members in the treatment planning and behavior planning process
- Demonstrate the ability to observe and report on client behavior and feelings
- Interact effectively with team members and children and youth during the admission and discharge process

Knowledge

- Various treatment modalities
- Service planning

Skills/Functions

- Demonstrates an understanding of therapeutic benefits, potential interactions and side effects of medication

Knowledge

- Psychotropic medications

Skills/Functions

- Demonstrates the ability to respond to the needs, desires, and interests of clients through formal and informal assessment practices
- Assists in quality improvement and outcomes measures

Knowledge

- Formal and informal assessment practices
- Quality improvement process

Core Competency Area 10 - Activities of Daily Living

Skills/Functions

- Assists clients with meeting physical needs such as health, daily hygiene, eating, and grooming
- Assists the client with household managements such as meal preparation, laundry, cleaning, decorating
- Assists the client with transportation needs

Knowledge

- Physical needs
- Household management

- Transportation guidelines

Skills/Functions

- Supports the child or youth in the development of positive friendships and other relationships
- Promote the development of age and gender appropriate relationships and commensurate social/life skills to foster pro-social behavior.

Knowledge

- Relationship Building