

## NORTH AMERICAN CERTIFICATION PROJECT (NACP) COMPETENCIES FOR PROFESSIONAL CHILD AND YOUTH WORK PRACTITIONERS

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## **The Project**

This document is the result of several years work by many North American Child and Youth Care Professionals. Some worked directly with the data, and in drafting and editing various sections of the document. More colleagues than can be named responded with expert opinions and additional information when called upon. We believe that this document articulates the competencies necessary for first level professional practice across the various settings in which child and youth care professionals practice.

The Association for Child and Youth Care Practice accepted this document at the annual meeting on October 20, 2001 in Lexington, Kentucky.

The Council of Canadian Child and Youth Care Associations (CCCY-CA) and its provincial members have reviewed the NACP Level 1 competencies and determined appropriate educational pre-requisites. Each provincial association will determine how the Level 1 competencies are recognized within that province's certification program for child and youth workers. Workers who are transferring between jurisdictions should check with the relevant provincial association.

## **Project Organization**

The North American Certification Project (NACP) ([www.acycp.org/](http://www.acycp.org/)) arose from a broad opinion that a North American certification for Child and Youth Care Practitioners was urgently needed. This project is a joint response of:

- ACYCP (formerly NOCCWA), Association for Child and Youth Care Practice (US)
- Council of Canadian Child and Youth Care Associations (CCCYCA)
- International Leadership Coalition for Professional Child and Youth Care Work (ILC)

The project is under the overall leadership of David Thomas, and has three working groups:

- resources, public relations, and networking: David Thomas
- competency development: Martha A. Mattingly
- structure and implementation of the credentials: Martha Holden

These organizations are formally supporting (NACP)

1. Academy of Child and Youth Care Professionals
2. Albert E. Trieschman Center
3. Association for Child and Youth Care Practice (formerly NOCCWA)
4. Child Welfare League of America
5. Council of Canadian Child and Youth Care Associations (CCCYCA).
6. International Coalition for Professional Child and Youth Care Work (ILC).
7. National Resource Center for Youth Services

### **Guiding Foundations of the Project**

The project has been guided by the current description of the field and a set of guiding principles.

#### **Current description of the field**

Professional Child and Youth Care Practice focuses on infants, children, and adolescents, including those with special needs, within the context of the family, the community, and the life span. The developmental-ecological perspective emphasizes the interaction between persons and their physical and social environments, including cultural and political settings.

Professional practitioners promote the optimal development of children, youth, and their families in a variety of settings, such as 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.

Child and youth care practice includes assessing client and program needs, designing and implementing programs and planned environments, integrating developmental, preventive, and therapeutic require-

ments into the life space, contributing to the development of knowledge and practice, and participating in systems interventions through direct care, supervision, administration, teaching, research, consultation, and advocacy.

### **Guiding principles of the NACP**

- 1. Inclusion:** All national, state, and local organizations, as well as persons concerned with setting standards for child and youth care practitioners are invited and encouraged to participate
- 2. Credibility:** The process is based on standards which are professionally recognized and established by respected assessment methods
- 3. Generic Standards:** The standards will be based on standards applicable to all child and youth care practice areas
- 4. Reciprocity:** The credential will be designed to support and encourage reciprocity
- 5. Ethics:** The certification process and standards will be initially based on Ethics of Child and Youth Care Professionals (Appendix A) developed by the Association for Child and Youth Care Practice (ACYCP, formerly NOCCWA) and the International Coalition for Professional Child and Youth Care Work (ILC). Other ethical statements can be included as the collaboration develops.

### **Levels of Certification Needed**

Discussions in a variety of professional forums have led to the conclusion that three levels of certification in child and youth care work can be considered: entry level, first professional level, and advanced level. The current focus of NACP and of this document is first professional level.

### **Work of the Competency Group**

#### **Clarification of the task**

This was an unfunded project with all participants, who are mature practitioners and academics in the profession, volunteering their time. Documents related to standards and competency in the field were collected and reviewed.

The task of the domain teams partly resembled a meta-analysis. The database is the wisdom of our past, but the field has and is changing. The domain team members had an understanding of the changes and at least

an educated guess about future directions. In a sense, we stood on these documents in order to look ahead.

The task was to use the documents as useful, but also to include our interpretation of meaning, fill in gaps, remove what was not useful, articulate new directions, make the language clear and direct, and establish congruence with current scholarship.

### **The process**

From the database four domains were identified: Professionalism, Applied Human Development, Relationship and Communication, and Developmental Practice Methods. An additional domain, cultural and human diversity, which did not emerge from the database was added. It is likely that culture and human diversity did not emerge from the database since many documents are older and our discussion of culture and diversity is a more recent phenomenon.

The field of child and youth care operates within a developmental ecological perspective. As such, this perspective also is applicable to the practice of the art and science of child and youth care. The domains of practice have application in a range of contexts. Organizing the competencies into discrete elements is useful for observing, assessing, and testing specific areas and for the design of training curricula. Professional practitioners have fully integrated the attitudes, skills, and knowledge components into any action they engage in and they adjust their practice according to the context. Skills are demonstrated within a context in a manner that demonstrates the practitioner's awareness of the meaning, atmosphere, and nature of the activities in that context. Communication with a supervisor, (for example), is different from communication with a youth, yet the basic skills would be described in the same manner. It is the context within which the action occurs and the integration of the appropriate attitudes and knowledge that differentiate the application. While the skills and knowledge within a particular subcategory of a domain are described in a generic manner, when they are integrated with the foundational attitudes for each contextual layer, their unique qualities emerge. It is intended that each domain be developed by the professional practitioner at the professional level through the contexts of application: self, relationship, environment, organization (system), and culture. The integrated qualities of a professional practitioner are detailed in Appendix A.

Organizing the competencies within the contexts of practice will be a future project.

### **Editing**

The compiled work of the domain teams contained the material needed for the competency document. This work was revised and edited by

Martha Mattingly and Carol Stuart. Karen VanderVen served as an additional editor.

The draft document was posted on the ACYCP web site for comment. Comments received were considered and revisions made.

## COMPETENCY DOCUMENT

### **Educational Requirements:**

The objective of the North American Certification Project (NACP) is to set credentialing standards for North America. However, it is important to recognize that there are significant differences between the United States and Canada, particularly in relation to educational programs.

In the United States, the baccalaureate degree from a regionally accredited college or university will be the minimal educational requirement to engage in the certification process at the first professional level. The educational requirement will be waived for an applicant who can document five years or more of experience in the field for a 10-year grandfathering period. Educational standards for engaging in the certification process for Canadians will be determined by the professional child and youth care community in Canada, using the structures in place (motions passed at the ACYCP Annual meeting on November 10-11, 2000).

It was further understood, but not the subject of an ACYCP motion, that the credential planning and implementation group could specify whatever specific coursework and training may be deemed appropriate. Such requirements would be for those applicants not using the waiver of the educational requirement.

In Canada the educational requirement to engage in the 1st. professional level of the NACP will include a minimum of one of the following:

1. Diploma (2 yrs. or more) from a program in Child and Youth Care studies at a provincially accredited college.
2. Baccalaureate degree in CYC or a related field from a provincially accredited college or university.

For a 10 year period following the implementation of NACP certification the educational requirement will be waived for anyone with 5 years experience who was employed as a CYC worker at the time of, or prior to, implementation.

### **Foundational Attitudes for Professional Child and Youth Care Work:**

The Child and Youth Care Professional demonstrates the following attitudes which underlie all professional work:

- accepts the moral and ethical responsibility inherent in practice
- promotes the well-being of children, youth and families in a context of respect and collaboration
- values care as essential for emotional growth, social competence, rehabilitation, and treatment
- celebrates the strengths generated from cultural and human diversity
- values individual uniqueness
- values family, community, culture and human diversity as integral to the developmental and interventive process
- believes in the potential and empowerment of children, youth family and community
- advocates for the rights of children, youth, and families
- promotes the contribution of professional child and youth care to society

## **THE COMPETENCIES**

### **I Professionalism**

Professional practitioners are generative and flexible; they are self-directed and have a high degree of personal initiative. Their performance is consistently reliable. They function effectively both independently and as a team member. Professional practitioners are knowledgeable about what constitutes a profession, and engage in professional and personal development and self-care. The professional practitioner is aware of the

function of professional ethics and uses professional ethics to guide and enhance practice and advocates effectively for children, youth, families, and the profession

### **A. Foundational Knowledge**

History, structure, organization of Child and Youth Care Work  
Resources and activities of CYC

Current and emergent trends in society, services, and in CYC

Structure and function of Codes of Ethics applicable to practice which includes the Code of Ethics, Standards for Practice of North American Child and Youth Care Professionals

([www.acycp.org](http://www.acycp.org))

Accepted boundaries in professional practice

Stress management and wellness practices

Strategies to build a professional support network

Significance of advocacy and an array of advocacy strategies

Relevant laws, regulations, legal rights and licensing procedures governing practice

### **B. Professional Competencies**

#### **1. Awareness of the Profession**

- a. access the professional literature
- b. access information about local and national professional activities (e.g., organizations, conferences, and certification)
- c. access information about and discuss the current professional issues and future trends and challenges in one's area of special interest
- d. contribute to the ongoing development of the field

#### **2. Professional Development and Behavior**

##### **a. Value orientation**

- (1) state personal and professional values and their implications for practice including how personal and professional beliefs, values and attitudes influence interactions.



- (2) state a philosophy of practice that provides guiding principles for the design, delivery, and management of services
- b. Reflection on one's practice and performance
  - (1) evaluate own performance to identify needs for professional growth.
  - (2) give and receive constructive feedback
- c. Performance of organizational duties
  - (1) demonstrate productive work habits
  - (2) know and conform to work rules relating to attendance, punctuality, appearance, sick and vacation time, and workload management
  - (3) personal appearance and behavior reflect an awareness of self as a representative of the organization
- d. Professional boundaries
  - (1) describe own needs and feelings and keeps them in perspective when professionally engaged
  - (2) model appropriate interpersonal boundaries
- e. Staying current
  - (1) keep up-to-date with developments in foundational and specialized areas of expertise
  - (2) identify and participate in education and training opportunities

### **3. Personal Development and Self Care**

- a. Self awareness
  - (1) recognize personal strengths and limitations, feelings and needs
  - (2) separate personal from professional issues
- b. Self care
  - (1) incorporate 'wellness' practices into own lifestyle
  - (2) practice stress management
  - (3) build and use a support network

**4. Professional Ethics**

- a. describe the functions of professional ethics
- b. apply the process of doing ethics and ethics as positive practice
- c. apply specific principles and standards from the relevant Code of Ethics to specific problems
- d. carry out work tasks in a way that conforms to professional ethical standards, principles and values

**5. Awareness of Law and Regulations**

- a. access and apply relevant local, state/provincial and federal laws, licensing regulations, and public policy (e.g., staffing ratios, confidentiality, driving laws, child abuse/neglect reporting, children, youth and family rights)
- b. describe the legal responsibility for reporting child abuse and neglect and the consequences of failure to report
- c. describe the meaning of informed consent and its application to a specific practice setting
- d. use the proper procedures for reporting and correcting non-compliance

**6. Advocacy**

- a. demonstrate knowledge and skills in use of advocacy
- b. access information on the rights of children, youth and families (in Canada this includes the United Nations Charter on the Rights of the Child)
- c. describe the rights of children youth and families in relevant settings and systems
- d. advocate for the rights of children, youth, and families in relevant settings and systems
- e. describe and advocate for safeguards for protection from abuse including institutional abuse
- f. ensure that children, youth and family views are heard and considered during the decision making processes which directly affect them

## II CULTURAL AND HUMAN DIVERSITY

Professional practitioners actively promote respect for cultural and human diversity. The professional practitioner seeks self-understanding and has the ability to access and evaluate information related to cultural and human diversity. Current and relevant knowledge is integrated in developing respectful and effective relationships and communication and developmental practice methods. Knowledge and skills are employed in planning, implementing and evaluating respectful programs and services, and workplaces.

### A. Foundational Knowledge

The professional practitioner is well versed in current research and theory related to cultural and human diversity including the eight major factors which set groups apart from one another, and which give individuals and groups elements of identity: age, class, race, ethnicity, levels of ability, language, spiritual belief systems, educational achievement, and gender differences.

Cultural structures, theories of change, values, within culture variations

Cross cultural communication

History of political, social, and economic factors which contribute to racism, stereotyping, bias and discrimination

Variations among families and communities of diverse backgrounds

Cultural and human diversity issues in the professional environment

### B. Professional Competencies

#### 1. Cultural and Human Diversity Awareness and Inquiry

a. describe own biases

b. describe interaction between own cultural values and the cultural value of others

c. describe own limitations in understanding and responding to cultural and human differences and seek assistance when needed

e. avoid stereotyping while accessing and using cultural information

f. access, and critically evaluate, resources that advance cultural understandings and appreciation of human diversity

- g. support children, youth, families, and programs in gaining resources which advance cultural understanding and appreciation of human diversity
- h. support children, youth, families and programs in overcoming culturally/ and diversity based barriers to services

## **2. Relationship and Communication Sensitive to Cultural and Human Diversity**

- a. adjust for the effects of age, cultural and human diversity, background, experience, and development on verbal and non-verbal communication
- b. describe the non-verbal and verbal communication between self and others (including supervisors, clients, or peer professionals)
- c. describe the role of cultural and human diversity in relationship history and support the development of healthy and productive relationships
- d. employ displays of affection and physical contact that reflect sensitivity for individuality, age, development, cultural and human diversity as well as consideration of laws, regulations, policies, and risks
- e. include consideration of cultural and human diversity in providing for the participation of families in the planning, implementation and evaluation of services impacting them
- f. give information in a manner sensitive to cultural and human diversity
- g. contribute to the maintenance of a professional environment sensitive to cultural and human diversity
- h. establish and maintain effective relationships within a team environment by: promoting and maintaining professional conduct; negotiating and resolving conflict; acknowledging and respecting cultural and human diversity; and, supporting team members

### **3. Cultural and Human Diversity Sensitive Developmental Practice Methods**

- a. integrate cultural and human diversity understandings and sensitivities in a broad range of circumstances
- b. design and implement programs and planned environments, which integrate developmental, preventive, and therapeutic objectives into the life space, through the use of methodologies and techniques sensitive to cultural and human diversity.
  - (1) provide multicultural and human diversity sensitive materials
  - (2) provide an environment that celebrates the array of human diversity in the world through graphic art, diversity of personnel, program materials, etc.
  - (3) recognize and celebrate particular calendar events which are culturally specific
  - (4) encourage the sharing of such culture specific events among members of the various cultural groups
- c. design and implement group work, counseling, and behavioral guidance with sensitivity to the client's individuality, age, development, and culture and human diversity
- d. employ understandings of cultural and human diversity in setting appropriate boundaries and limits on behavior, including risk management decisions, with sensitivity to cultural and human diversity

### **III APPLIED HUMAN DEVELOPMENT**

Professional practitioners promote the optimal development of children, youth, and their families in a variety of settings. The developmental-ecological perspective emphasizes the interaction between persons and their physical and social environments, including cultural and political settings. Special attention is given to the everyday lives of children and youth, including those at risk and with special needs, within the family, neighborhood, school and larger social-cultural context. Professional practitioners integrate current knowledge of human development with the skills, expertise, objectivity and self-awareness essential for developing, implementing and evaluating effective programs and services.

### **A. Foundational Knowledge**

The professional practitioner is well-versed in current research and theory in human development with an emphasis on a developmental-ecological perspective.

Life Span Human Development

Child/Adolescent Development (as appropriate for the arena of practice), including domains of

Cognitive Development

Social-emotional Development

Physiological Development

Psycho-sexual Development

Spiritual Development

Exceptionality in Development including at-risk and special needs circumstances such as: trauma, child abuse/neglect, developmental psychopathology, and developmental disorders

Family Development, Systems and Dynamics

### **B. Professional Competencies:**

#### **1. Developmental-Ecological Assessment**

- a. assess development in different domains and across different contexts
- b. evaluate the developmental appropriateness of environments with regard to the individual needs of clients
- c. assess client and family needs in relation to for community opportunities, resources and supports

#### **2. Developmentally-Ecologically Sensitive Relationship and Communication**

- a. adjust for the effects of age, culture, background, experience, and developmental status on verbal and non-verbal communication
- b. communicate with the client in a manner which is developmentally sensitive and that reflects the client's developmental strengths and needs.

- (1) recognize the influence of relationship history on the current development of the client
  - (2) employ displays of affection and physical contact that reflect sensitivity for individuality, age, development, cultural and human diversity as well as consideration of laws, regulations, policies, and risks
  - (3) responds to help-seeking behavior while encouraging and promoting several alternatives for the healthy expression of needs and feelings
- c. give accurate developmental information in a manner that facilitates growth
  - d. partner family in goal setting and designing developmental supports and interventions
  - e. assist clients (to a level consistent with their development, abilities and receptiveness) to access relevant information about legislation/regulations, policies/standards, as well as additional supports and services

### **3. Developmentally-Ecologically Sensitive Practice Methods**

- a. support development in a broad range of circumstances in different domains and contexts
- b. design and implement programs and planned environments including activities of daily living, which integrate developmental, preventive, and therapeutic objectives into the life space through the use of developmentally sensitive methodologies and techniques
- c. individualize developmental, preventive and therapeutic plans to reflect differences in culture/human diversity, background, temperament, personality and differential rates of development across the domains of human development
- d. design and implement group work, counseling, and behavioral guidance, with sensitivity to the client's individuality, age, development, and culture

- e. employ developmentally sensitive expectations in setting appropriate boundaries and limits
- f. create and maintain a safe and growth promoting environment.
- g. make risk management decisions that reflects sensitivity for individuality, age, development, culture and human diversity, while also insuring a safe and growth promoting environment

#### **4. Access Resources That Support Healthy Development**

- a. locate and critically evaluate resources which support healthy development
- b. empower clients, and programs in gaining resources which support healthy development

### **IV RELATIONSHIP AND COMMUNICATION**

Practitioners recognize the critical importance of relationships and communication in the practice of quality child and youth care. Ideally, the service provider and client work in a collaborative manner to achieve growth and change. *'Quality first'* practitioners develop genuine relationships based on empathy and positive regard. They are skilled at clear communication, both with clients and with other professionals. Observations and records are objective and respectful of their clients. Relationship and communication are considered in the context of the immediate environment and its conditions; the policy and legislative environment; and the historical and cultural environment of the child, youth or family with which the practitioner interacts.

#### **A. Foundational Knowledge**

- Characteristics of helping relationships
- Characteristics of healthy interpersonal relationships
- Cultural differences in communication styles
- Developmental differences in communication
- Communication theory (verbal and non-verbal)
- Group dynamics and teamwork theory
- Family dynamics and communication patterns, including attachment theory as it relates to communication style



## **B. Professional Competencies**

### **1. Interpersonal Communication**

- a. adjust for the effects of age, cultural and human diversity, background, experience, and development of verbal and non-verbal communication
- b. demonstrate a variety of effective verbal and non-verbal communications skills including:
  - use of silence
  - appropriate non-verbal communication (eye contact, tone of voice, facial expression, nodding, spatial proximity and body position)
  - active listening (attending minimal encouragers, and reflective responses)
  - empathy and reflection of feelings
  - questioning skills (use open and closed questions and avoid why questions)
  - use of door openers to invite communication, and paraphrasing and summarization to promote clear communication
  - awareness and avoidance of communication roadblocks
- c. recognize when a person may be experiencing problems in communication due to individual or cultural and human diversity history, and help clarify the meaning of that communication and to resolve misunderstandings
- d. assist clients (to a level consistent with their development, abilities and receptiveness) to receive relevant information about legislation/regulations, policies/standards, and supports pertinent to the focus of service
- e. provide for the participation of children/youth and families in the planning, implementation and evaluation of service impacting them
- f. set appropriate boundaries and limits on the behaviour using clear and respectful communication
- g. verbally and non verbally de-escalate crisis situations in a manner that protects dignity and integrity

## 2. Relationship Development

- a. assess the quality of relationships in an ongoing process of self-reflection about the impact of the self in relationship in order to maintain a full presence and an involved, strong healthy relationship
- b. form relationships through contact, communication, appreciation, shared interests, attentiveness, mutual respect, and empathy
- c. demonstrate the personal characteristics that foster and support relationship development such as honesty, predictability, dependability, commitment, tolerance, flexibility, and compassion
- d. ensures that, from the beginning of the relationship, agency procedures regarding confidentiality, consent for release of information, and record keeping are explained and clearly understood by the parent/caregiver and by the child, as appropriate to his/her developmental age. Follow those procedures in a caring and respectful manner
- e. develop relationships with service recipients that are caring, purposeful, goal-directed and rehabilitative in nature; limiting these relationships to the delivery of specific services
- f. set, maintain, and communicate appropriate personal boundaries
- g. assist clients to identify personal issues and make choices about the delivery of service
- h. model appropriate use of self for handling the activities and situations of daily living
- i. use structure, routines, and activities to promote effective relationships
- j. encourage children, youth, and families to contribute to programs, services, and support movements that affect their lives by sharing authority and responsibility
- k. develop and communicate an informed understanding of social trends, social change and social institutions. Demonstrate an understanding of how social issues affect relationships between individuals, groups, and societies

- l. develop and maintain relationships with community members and neighbors in order to identify community standards and expectations for behaviour that enable children, youth and families to maintain existing relationships

### **3. Family Communication**

- a. assess the social ecology of clients by identifying relevant systems/components, identifying and describing the relationships, rules and roles in the child's social systems and developing connections among the people in the child's various social systems
- b. recognize the influence of the child's relationship history and help the child develop productive ways of relating to family and peers
- c. encourage children and families to share folklore and traditions related to family and cultural background. Employ strategies to connect children to their life history and relationships
- d. teach parents skills and attitudes which will help them to experience positive and healthy relationships with their children

### **4. Teamwork and Professional Communication Skills**

- a. establish and maintain effective relationships within a team environment by: promoting and maintaining professional conduct; negotiating and resolving conflict; acknowledging individual differences; and, supporting team members
- b. explain and maintain appropriate boundaries with professional colleagues
- c. assume responsibility for collective duties and decisions including responding to team member feedback
- d. use appropriate professional language in communication with other team members, consult with other team members to reach consensus on major decisions regarding services for children and youth and families
- e. build cohesion among team members through active participation in team-building initiatives
- f. collect, analyze and present information in written and oral form by selecting and recording information according to identified needs, agency policies and guidelines. Accurately record relevant interactions and issues in the relationship

- g. plan, organize, and evaluate interpersonal communications according to the identified need, context, goal of communication, law/regulation, and ethics and involved. Choose an appropriate format, material, language, and style suitable to the audience
- h. acknowledge and respect other disciplines in program planning, communication and report writing using multidisciplinary and interdisciplinary perspectives. Communicate the expertise of the profession to the team
- i. establish and maintain a connection, alliance, or association with other service providers for the exchange or information and to enhance the quality of service
- j. deliver effective oral and written presentations to a professional audience
- k. demonstrate proficiency in using information technology for communication, information access, and decision-making

## V DEVELOPMENTAL PRACTICE METHODS

Practitioners recognize the critical importance of developmental practice methods focused in CYC practice: Genuine Relationships, Health and Safety, Intervention Planning, Environmental Design and Maintenance, Program Planning and Activity Programming, Activities of Daily Living, Group Work, Counseling, Behavioral Guidance, Family (Caregiver) Engagement, Community Engagement. These are designed to promote optimal development for children, youth, and families including those at-risk and with special needs within the context of the family, community and the life span.

### A. Foundational Knowledge

Health and safety

Intervention theory and design

Environmental design

Program planning and Activity Programming including:

- developmental rationales
- basic strategies of program planning
- specific developmental outcomes expected as a result of participating in activities
- principles of activity programming, e.g. activity analysis, adaptation, strategies for involving youth in activities
- relationship of developmental processes to the activities of daily living (eating, grooming, hygiene, sleeping and rest)

- the significance of play activities
  - community resources for connecting children, youth and families with activity and recreational programs
- Behavioral Guidance methods including conflict resolution, crisis management, life space interviewing
- Behavior Management methods
- Counseling Skills
- Understanding and Working with Groups
- Understanding and Working with Families
- Understanding and Working with Communities

## **B. Professional Competencies**

### **1. Genuine Relationships**

Practitioners recognize the critical importance of genuine relationships based on empathy and positive regard in promoting optimal development for children, youth, and families. Forming and maintaining such relationships is regarded as a central change strategy (method) for CYC practice. This area is fully described in section III Relationship and Communication. The reader is referred to this section for competencies and the related foundational knowledge.

### **2. Health and Safety**

#### **a. environmental safety**

- (1) participate effectively in emergency procedures in a specific practice setting and carry them out in a developmentally appropriate manner
- (2) incorporate environmental safety into the arrangement of space, the storage of equipment and supplies and the design and implementation of activities

#### **b. health**

- (1) access the health and safety regulations applicable to a specific practice setting, including law/regulations related to disability
- (2) use current health, hygiene and nutrition practices to support health development and prevent illness
- (3) discuss health related information with children, youth and families as appropriate to a specific practice setting

c. medications

- (1) access current information on medications taken by clients in a specific practice site
- (2) describe the medication effects relevant to practice
- (3) describe the rules and procedures for storage and distribution of medication in a specific practice site, and participate as appropriate

d. infectious diseases

- (1) access current information on infectious diseases of concern in a specific practice setting
- (2) describe the components relevant to practice
- (3) employ appropriate infection control practices

**3. Intervention planning**

a. perform needs assessment

b. translate agency mission and group objectives into individual treatment or developmental/educational plans taking individual histories and interests into account

c. encourage client participation in assessment and goal setting in intervention planning and the development of individual educational, developmental, and treatment plans

d. integrate client empowerment and support of strengths into conceptualizing and designing interventions

e. develop and present a theoretical/empirical rationale for a particular intervention

f. select and apply an appropriate planning model

g. select appropriate goals or objectives from treatment, educational, developmental plans and design activities, interactions, management methods that support them in a developmental/educational/therapeutically appropriate way

h. work with client and team to assess and monitor progress and revise plan as needed

**4. Environmental Design and Maintenance**

- a. describe the messages conveyed by environment
- b. design and maintain planned environments which integrate developmental, preventive, and interventive requirements into the life space, through the use of developmentally and culturally sensitive methodologies and techniques
- c. arranges space, equipment and activities in the environment to promote participation and prosocial behavior, and to meet program goals
- d. involve clients appropriately in space design, and maintenance

**5. Program Planning and Activity Programming**

- a. connect own childhood activity experiences and skills, and adult interests and skills, to current work
- b. teach skills in several domains of activity, e.g. arts, crafts, sports, games, music
- c. assist clients in identifying and developing their strengths through activities and other experiences
- d. design and implement programs and activities which integrate age, developmental, preventive, and interventive requirements and sensitivity to culture and diversity into the life space
- e. design and implement challenging age, developmentally, and cultural and human diversity appropriate activity programs
  - (1) perform an activity analysis, i.e. a scrutiny of how the components and elements of an activity match to the characteristics and dynamics of clients, and to program goals
  - (2) assess clients interests, knowledge of and skill level in various activities
  - (3) promotes client's participation in activity planning
  - (4) select and obtain resources necessary to conduct a particular activity or activity program
  - (5) perform ongoing (formative) and outcome (summative) evaluation of specific activities/and activity programs

- g. adapt activities for particular individuals or groups including special needs/at risk clients
- h. locate and critically evaluate community resources for programs and activities and connect children, youth, and families to them.

#### **6. Activities of Daily Living**

- a. integrate client's need for dignity, positive public image, nurturance, choice, self-management, and privacy into activities of daily living
- b. design and implement, and support caregivers to implement, activities of daily living, which integrate age, developmental, preventive, and interventive requirements and sensitivity to culture and diversity into the life space:
  - (1) age and cultural and human diversity appropriate well maintained clothing
  - (2) pleasant and inviting mealtimes that encourage positive social interaction
  - (3) age and developmentally appropriate bedtimes and rest opportunities
  - (4) clean and well-maintained bathroom and bathing facilities that allow age and developmentally appropriate privacy and independence
  - (5) personal space adequate for safe storage of personal belongings and for personal definition through decorations that do not exceed reasonable propriety
- c. design and maintain inviting, hygienic and well-repaired physical environments and equipment and supplies which positively support activities of daily living



d. encourages client development of skills in activities of daily living

(1) personal hygiene and grooming skills

(2) developing and maintaining of areas related to daily living e.g. maintaining living space, preparing and serving meals, cleanup

(3) socially appropriate behavior in activities of daily living: respecting others' privacy, expected grooming and dress for various occasions

### **7. Group Process**

a. assess the group development and dynamics of a specific group of children and youth

b. use group process to promote program, group, and individual goals

c. conduct group sessions around specific topics/issues

d. mediate in group process issues e.g. acceptance of a new member, loss of a group member, scapegoating, kangaroo court, subgroup resistance

### **8. Counseling**

a. forming and maintaining relationships is the foundation for counseling and is fully described in section IV (Relationship and Communication) where competencies and the related foundational knowledge are listed

b. has self-awareness and uses oneself appropriately in counseling activities

d. able to assess a situation in the milieu or in individual interaction and select the appropriate medium and content for counseling

g. able to make appropriate inquiry to determine meaning of a particular situation to a child

h. encourage insight and problem solving

i. employ effective problem solving and conflict resolution skills

**9. Behavioral Guidance**

- a. assess client behavior including its meaning to the client
- b. design behavioral guidance around level of client's understanding
- c. assess the strengths and limitations of behavioral management methods
- d. employ selected behavioral management methods, where deemed appropriate
- e. assist other adults, staff and parent, and caregivers in learning and implementing appropriate behavioral guidance techniques and plans
- f. give clear, coherent and consistent expectations; sets appropriate boundaries
- g. evaluate and disengage from power struggles
- h. employ genuine relationship to promote positive behavior
- i. employ developmental and cultural/diversity understandings to promote positive behavior
- j. employ planned environment and activities to promote positive behavior
- k. employ at least one method of conflict resolution
- l. employ principles of crisis management
  - (1) describe personal response to crisis situations
  - (2) describe personal strengths and limitations in responding to crisis situations
  - (3) take self-protective steps to avoid unnecessary risks and confrontations
  - (4) dress for interventive contact
  - (5) employ a variety of skills to defuse a crisis
  - (6) describe the principles of physical intervention
  - (7) conduct a life space interview

**10. Family (Caregiver) Engagement**

- a. communicate effectively with family members
- b. partner family in goal setting and designing and implementing developmental supports and interventions
- c. identify client and family needs for community resources and supports
- d. support family in gaining resources for interests, education and the like, and in overcoming barriers to such attainment
- f. advocate for and with family to secure proper services

**11. Community Engagement**

- a. access up-to-date information about service systems, support and advocacy resources, and community resources, law, regulation and public policy
- b. demonstrate the ability to initiate, create, and sustain collaborative relations with other organizations and persons
- c. facilitate client contact with relevant community agencies

**APPENDIX A****CODE OF ETHICS****STANDARDS FOR PRACTICE OF NORTH AMERICAN CHILD AND YOUTH CARE PROFESSIONALS**

International Leadership Coalition of Professional  
Child and Youth Care  
June 1995

**PREAMBLE**

Professional Child and Youth Care is committed to promoting the well being of children, youth, and families in a context of respect and collaboration. This commitment is carried out in a variety of settings and with a broad range of roles including direct practice, supervision, administration, teaching and training, research, consultation, and advocacy. In the course of practice Child and Youth Care Professionals encounter many situations which have ethical dimensions and implications.

As Child and Youth Care Professionals we are aware of, and sensitive to, the responsibilities involved in our practice. Each professional has the responsibility to strive for high standards of professional conduct. This includes a commitment to the centrality of ethical concerns for Child and Youth Care practice, concern with one's own professional conduct, encouraging ethical behavior by others, and consulting with others on ethical issues.

This ethical statement is a living document, always a work in progress, which will mature and clarify as our understanding and knowledge grow. The principles represent values deeply rooted in our history, to which there is a common commitment. They are intended to serve as guidelines for conduct and to assist in resolving ethical questions. For some dilemmas, the principles provide specific or significant guidance. In other instances, the Child and Youth Care Professional is required to combine the guidance of the principles with sound professional judgment and consultation. In any situation, the course of action chosen is expected to be consistent with the spirit and intent of the principles.

## **PRINCIPLES AND STANDARDS**

### **I. Responsibility For Self:**

- A. Maintains competency.
  - 1. Takes responsibility for identifying, developing, and fully utilizing knowledge and abilities for professional practice.
  - 2. Obtains training, education, supervision, experience and/or counsel to assure competent service.
- B. Maintains high standards of professional conduct.
- C. Maintains physical and emotional well-being.
  - 1. Aware of own values and their implication for practice.
  - 2. Aware of self as a growing and strengthening professional.

### **II. Responsibility To The Client**

- A. Above all, shall not harm the child, youth or family.
  - 1. Does not participate in practices that are disrespectful, degrading, dangerous, exploitive intimidating, psychologically damaging, or physically harmful to clients.
- B. Provides expertise and protection.
  - 1. Recognizes, respects, and advocates for the rights of the child, youth and family.
- C. Recognizes that professional responsibility is to the client and advocates for the client's best interest
- D. Ensures that services are sensitive to and non-discriminatory of clients regardless of race, color, ethnicity, national origin, national ancestry, age, gender, sexual orientation, marital status, religion, abilities, mental or physical handicap, medical condition, political belief, political affiliation, socioeconomic status.
  - 1. Obtains training, education, supervision, experience, and/or counsel to assure competent service.
- E. Recognizes and respects the expectations and life patterns of clients.

1. Designs individualized programs of child, youth and family care to determine and help meet the psychological, physical, social, cultural and spiritual needs of the clients.
  2. Designs programs of child, youth, and family care which address the child's developmental status, understanding, capacity, and age.
- F. Recognizes that there are differences in the needs of children, youth and families.
1. Meets each client's needs on an individual basis.
  2. Considers the implications of acceptance for the child, other children, and the family when gratuities or benefits are offered from a child, youth or family.
- G. Recognizes that competent service often requires collaboration. Such service is a cooperative effort drawing upon the expertise of many.
1. Administers medication prescribed by the lawful prescribing practitioner in accordance with the prescribed directions and only for medical purposes. Seeks consultation when necessary.
  2. Refers the client to other professionals and/or seeks assistance to ensure appropriate services.
  3. Observes, assesses, and evaluates services/treatments prescribed or designed by other professionals.
- H. Recognizes the client's membership within a family and community, and facilitates the participation of significant others in service to the client.
- I. Fosters client self determination.
- J. Respects the privacy of clients and holds in confidence information obtained in the course of professional service.
- K. Ensures that the boundaries between professional and personal relationships with clients is explicitly understood and respected, and that the practitioner's behavior is appropriate to this difference.
1. Sexual intimacy with a client, or the family member of a client, is unethical.

### **III. Responsibility To The Employer/Employing Organization:**

- A. Treats colleagues with respect, courtesy, fairness, and good faith.
- B. Relates to the clients of colleagues with professional consideration.
- C. Respects the commitments made to the employer/employing organization.

**IV. Responsibility To The Profession:**

- A. Recognizes that in situations of professional practice the standards in this code shall guide the resolution of ethical conflicts.
- B. Promotes ethical conduct by members of the profession.
  - 1. Seeks arbitration or mediation when conflicts with colleagues require consultation and if an informal resolution seems appropriate.
  - 2. Reports ethical violations to appropriate persons and/or bodies when an informal resolution is not appropriate.
- C. Encourages collaborative participation by professionals, client, family and community to share responsibility for client outcomes.
- D. Ensures that research is designed, conducted, and reported in accordance with high quality Child and Youth Care practice, and recognized standards of scholarship, and research ethics.
- E. Ensures that education and training programs are competently designed and delivered.
  - 1. Programs meet the requirements/claims set forth by the program.
  - 2. Experiences provided are properly supervised.
- F. Ensures that administrators and supervisors lead programs in high quality and ethical practice in relation to clients, staff, governing bodies, and the community.
  - 1. Provides support for professional growth.
  - 2. Evaluates staff on the basis of performance on established requirements.

**V. Responsibility To Society:**

- A. Contributes to the profession in making services available to the public.
  - B. Promotes understanding and facilitates acceptance of diversity in society.
  - C. Demonstrates the standards of this Code with students and volunteers.
  - D. Encourages informed participation by the public in shaping social policies and institutions.
- <sup>2</sup>Client is defined as the child, family, and former clients.

## APPENDIX B

### A FRAMEWORK FOR INTEGRATING ATTITUDES, SKILLS, AND KNOWLEDGE

Competence as a practitioner arises from the integration of the attitudes, skills and knowledge described in this document into the contexts in which CYC practice occurs. Organizing the competencies into subcategories within each domain is useful for observing, assessing, and testing specific areas and for the design of training curricula. Professional practitioners though, engaged in quality practice, have fully integrated the attitudes, skills, and knowledge components into any action they engage in and they adjust their practice according to the context that they are in. This section presents a three-dimensional framework to develop competency beyond entry level and the first professional level of practice to advanced practice. Quality practice with fully integrated attitudes, skills, and knowledge occurs across the domains of practice in which the skills have been previously described and is performed in depth through five layers of context.

#### Knowledge

The knowledge foundation for each domain is described previously. These areas of knowledge provide the background depth for the demonstration of practice in multiple contexts. Through the demonstration of skills, knowledge is applied in a manner that integrates theory and fact with experiential knowing and foundational values and attitudes. This integration results in high-quality practice as knowledge deepens and is applied to many and varied problems. Mature practitioners recognize that theories and facts have multiple applications. Developmental theory explains not just the behavior of a child or youth but also the behavior of a co-worker or the way components of an agency relate to each other.

#### Contexts for Practice

Knowledge areas are relatively discrete for each domain of practice but cross the layers or contexts in which practice occurs. Skills are demonstrated within a context in a manner that demonstrates the practitioner's awareness of the unique meaning, atmosphere, and nature of the activities in that context. While the skills and knowledge within a particular subcategory of a domain are described in a generic manner, when they are integrated with the foundational attitudes that define each contextual layer, their unique qualities emerge.

An ethical decision making process is applied to a decision about whether to report evidence of neglect of a child during a visit with a family. In the practice milieu of family support, or supervised access; the meaning of making a report; the number of people and the nature of the

effect of the report; and the activities and responsibilities of the CYC are specific to one or two children and their parents. A similar ethical decision making process is applied to a decision about whether to report licensing violations in a foster home or after school care visited by a CYC. In the context of this organizational system though the meaning of making a report; the number of people and the nature of the effects are potentially much broader and involve more people. The application of the skills of the ethical decision making process in each circumstance is different. A mature practitioner at the advanced level of practice brings a more integrated application of knowledge and attitudes to the skill of ethical decision making, accounts for more variables in the process, and may well arrive at a decision faster and with greater clarity.

Similarly, developing a relationship and communicating with a supervisor (for example), is different from communication with a youth, yet the basic skills could be described in the same manner. It is the context within which the action occurs and the integration of the appropriate attitudes and knowledge that differentiate the application of these skills.

There are five contexts within which quality practice occurs. These contexts may occur simultaneously or distinctly.

1. The Self
2. Relationships
3. The Practice Milieu
4. The Organizational System
5. Culture

Each layer has a set of foundational attitudes that cross all of the domains of practice. The nature of each layer and the boundaries of its context are described below, followed by a depiction of the integrated framework in three-dimensional form. Following this, is a brief description of the nature of integrated quality practice in each of the 25 intersections of the domains of practice with the contexts of practice.

### **The self**

Within the context of the self, practice focuses on the use of self as a mediator of knowledge and skills. Practitioners have insight into the factors of their own development, the impact of self- factors on practice interventions, and the dialectic tension between using one's personhood in relationships and inter-personal communication with a client. They are aware of and act on the limiting effect of professional client boundaries on the relationship. They are aware of their culture and its impact on their day to day practice and have a sense of identity as a professional. Foundational to child and youth care is the use of self, but to make effective use of self in practice one must first be aware of and able to articulate the nature of the self.



### **Relationships**

In the context of relationship, practice focuses on the form and nature of interpersonal relations, both with clients and with other practitioners. Practitioners actively develop relationships with others through communication and shared activities. They are conscious of the process of relationship development and actively consider how the psycho-social developmental status and culture of the other person and their own developmental history and culture influence the nature of any particular relationship. They are clear about the nature of personal and professional boundaries with clients and co-workers and respectful of the professional needs of others. All practice methods are implemented using the interpersonal relationship as a foundation from which development occurs.

### **Milieu**

The milieu is the central context within which child and youth care practice occurs. The milieu is used to enhance the developmental trajectory of children, youth, and families that participate in it. In this context, practitioners are aware of the environment and the multiple interactions and activities occurring within that environment. They arrange environmental factors to offer quality care, plan their communication with an awareness of the activities of the milieu and the nature of interpersonal relationships within it. They are able to integrate individual members of the milieu into a group culture. They demonstrate professional behavior reflective of the nature of their practice setting. Practice milieus encompass many different settings as outlined by the current description of the field:

Professional practitioners promote the optimal development of children, youth, and their families in a variety of settings, such as 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 organizational system**

Child and youth care practice occurs within the context of an agency or organizational system. Skilled practitioners understand the nature of the system and its influence on their practice and work to influence the system so that it offers quality service to all clients. They interpret policy, procedures, and legislation according to the nature of the developmental status of their clients. Professional communication follows but is not limited by the system requirements. The planning and implementation of practice methods take into consideration the nature of the system and its philosophical standpoint. Skilled practitioners integrate the culture of the

organization, their own culture, that of their clients, and their co-workers by respecting difference and negotiating a common understanding of right and wrong within this context.

### **Culture**

Culture is not just centered in race or ethnicity, but includes the social and political norms, values, morals, faith, language, and socio-economic status of a group of people with a common history. Culture is both a domain of practice and a context within which practice occurs. In the context of culture, skilled practitioners bridge cultural differences through communication and respect for individuals and groups. They actively seek an understanding of how culture influences the developmental history of persons and how that may diverge from their own referential framework for culture. Skilled practitioners recognize and adopt a professional culture, without forsaking their own personal culture. In the nexus of culture as a domain of practice and culture as a context for practice differences are bridged across all other contexts (layers) of practice.

### **A Relational Database for Professional Practice Skills**

The skill competencies outlined previously can be re-organized in a manner that offers an integrated picture of skills, attitudes and knowledge. This type of organization is useful for determining training curricula that facilitate transfer of learning to the workplace, where such skilled integration is required in every interaction the practitioner has with a child, youth or family. The skill competencies can be organized according to sub-categories in the domains in the foregoing document, but each competency could also be identified as belonging to a particular context for practice. As such, they can be re-organized, if desired, into contextual layers of practice. This organization may assist in our using the competency organization of this document to develop application to entry level and professional level practitioners. A professional practitioner might demonstrate skills in all of these contexts. A beginning practitioner may only have skills in the first three contexts.