

Residential Child Care

State Board for the Certification of Residential Child Care Program Administrators

Volume 4, Issue 2

Message from the Chairman, Dr. Albert Zachik

The State Board established a committee in December 2010 to review the statutory and regulatory requirements for certification of child care workers or Residential Child and Youth Care Practitioners ("RCYCP").

The Certification Committee has worked very hard over this winter/spring to put forth recommendations to improve and streamline the certification of child care workers.

During this Legislative Session, a bill was passed to require the Governor's Office for Children to convene a Summer Study Workgroup to develop an implementation plan for certification of child care workers and to investigate whether or not the 2015 implementation date is feasible.

The State Board, and the Certification Committee, have been working with the Governor's Office on the Summer Study. The Summer Study Workgroup meetings have generated very beneficial discussions.

The State Board looks forward to continuing its work with the GOC on the Summer Study.



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Special points of interest:

- Earn Free CEUs for Attending Board Meetings
- Update your Program Profiles in SCYFIS
- Visit the State Board's web site (www.dhmh.state.md.us/crccp) for updates

Mission & Vision

State Board's Mission...The mission of the State Board is to protect children living in Maryland's residential child care programs through certifying and regulating residential child care professionals; receiving and resolving complaints; and setting standards for the practice of residential child care. State Board's Vision...The State of Maryland will provide qualified residential child care professionals to further the well-being of children living in Maryland's residential child care programs.

Failure to Notify of Change of Information—Fine

CRCCPAs are required to notify the State Board within 30-days of a change in either their:

- Name,
- Address.
- Email Address, or
- Employer

Pursuant to COMAR 10.57.06.01 (G), if a CRCCPA fails to provide this notification, they will be issued a \$50 administrative fine.

Therefore, it is important that CRCCPAs provide timely notification of

such changes to the State Board. Notification must be made in writing utilizing the form available on the State Board's web site or by simply email the State Board the new information.

If you have any questions regarding change of address requirements or want to verify your mailing address, please contact the State Board's offices.

State Board's web site address:

www.dhmh.state.md.us/crccp
State Board's email address:

crccp@dhmh.state.md.us



Continuing Education Requirements

Continuing education is meant to foster an improvement, advancement, and extension of a CRCCPAs professional skill and knowledge relating to residential child care. Continuing education is intended to be training obtained above the minimum annual training requirements in COMAR 14.31.06 F and may not include CPR or First Aid.

CRCCPAs must complete 40 hours of continuing education per renewal cycle. Continuing education may include academic course work, workshops, seminars, etc. Continuing education must be taken from programs that are either approved by the State Board or recognized by the State Board as automatic sponsors.

The State Board will accept a maximum of 5 continuing education credits per renewal cycle in the content area of behavior management. These are the programs approved by the Governor's Office for Children for behavioral intervention training.

The State Board will not process renewal applications of CRCCPAs who have not obtained the required continuing education for renewal of their certificates

If a CRCCPA does not have the required continuing education credits to renew their certificate, they should contact the State Board immediately.

Approved Continuing Education Providers

Continuing education must be taken from providers that have either been approved by the State Board or recognized by the State Board as automatic sponsors.

A list of approved providers, including their contact information is available on the State Board's web site.

The following is a list of organizations that are recognized by the state Board as automatic sponsors, and may sponsor, or approve, or both, continuing education programs:

- (1) State, regional and international associations for child and family services; dietetics; education; medical or allied health professionals; professional counseling or therapy; psychiatry, psychology, nursing and social work.
- (2) National, regional or State accredited academic institutions offering academic courses or programs that apply to field of residential child care.
- (3) Agencies, institutions, organizations, or individuals authorized as automatic sponsors or approved sponsors of continuing education by the State

Board for Social Work Examiners under COMAR 10.42.06,

(4) Agencies, institutions, organizations, or individuals approved by any State licensing or certification boards under the Health Occupation Article, Annotated code of Maryland.

If a provider of continuing education is not recognized by the State Board as an approved provider or automatic sponsor, you may still obtain credit by requesting individual approval of course. There is a form available on the State Board's website to request such approval.

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Non-Renewed CRCCPAs

A00148 Ajanaku,	Franklin A000	066	Feh, Daniel	A00029	Mittelman, Mark	
A00135 Albrecht,	Dirk A000	003	Geddes, Robert	A00033	Morgan-Jones, Joan	
A00117 Allen, Ka	ren A00	102	Gillespie, Shannon	A00095	Morrill, Kimberly	
A00046 Ambrose	Debra A000	038	Gordon, Rochetta	A00105	Neverdon-Merritt, Michal	
A00072 Ben, Bar	bara A000	027	Greenwald, Lauren	A00155	Nwachuku, Chukunyere	
A00154 Benjamir	n-Dyanick, Karen A00	120	Hill, Towanda	A00111	Okojie, Peter	
A00168 Bennett,	Donna A00	113	Hinton, Anita	A00112	Omotosho, Samson	
A00015 Bonk, Ja	ne A00	103	Holder, Cheryl	A00007	Reed, III, Wayne	
A00129 Braxton,	Shannel A00	108	Holland, Angela	A00023	Richards, Louise	
A00009 Burney,	Jr., Lester A000	040	Ibraheem, Sharadeen	A00071	Roth, Charles	
A00082 Butler, Y	vonne A000	098	Inyinbor, Fidelis	A00024	Slocomb, John	i
A00153 Chinda, I	Ndubuisi A00	156	Itula, Francis	A00109	Smith, Shauna	
A00100 Cimen, D	Pide A00	125	Lamar, Derrick	A00122	Smith, Ronald	ĺ
A00115 Clark, Pa	atricia A000	074	Lee, Oya Oner	A00104	Stearman, Miriam	
A00119 Croker, J	ulie A00	150	Lewis, Angela	A00051	Stiffler, Troy	
A00086 Doughert	cy, Colleen A000	094	London, tonya	A00099	Warren, Lititia	
A00093 Drumhel	ler, Kevin A00	121	Ludwig, Keith	A00110	White, Mundrae	
A00152 Ervanga,	Edekin A00	126	Marryshow, Derek	A00064	Williams, Elaine	
A00138 Esh, Dav	id A000	019	Matricardi, Edward	A00004	Wolz, Gary	
				A00034	Woodward-Brown, Diane	



Check the State Board's web site at www.dhmh.state.md.us/crccp/ to verify certification status.

Disciplinary Actions

The State Board, pursuant to House Bill 114/Senate Bill 291 of the 2010 General Assembly Session, has begun to post disciplinary orders. Copies of the orders are available on the State Board's web site by clicking on "List of Board Orders".

Lori Harper	A00035	Letter of Surrender	Effective 11/17/10	Continuing Education Violations
Cindy McGill	A00060	Letter of Surrender	Effective 1/4/10	Criminal Convictions
Toya J. Pierce	A00200	Consent Order	Effective 6/14/10	Violations of Act
Myron Price		Denial of Application	Effective 5/2/11	Criminal Conviction

Certification Committee

This December 2010, established a committee and tasked it with the review of statutory and regulatory certification requirements for Residential Child and Youth Care Practitioners ("RCYCP"). The workgroup has met 8 times and is almost completed its work. Staff is drafting a final report to be reviewed by Certification Committee this month. The final report will be submitted to the State Board at its July meeting.

The Certification workgroup focused its review on transitioning the training program from an academic to a competency based model. This has resulted in a decrease in the number of training hours, focusing on essential skills and knowledge needed by direct care workers.

In addition, the Certification Committee has made recommendations that include: waving of fees, grandfathering of existing direct care workers, waving the School for the Blind, State Board approval of training programs, modifying certification requirements; and, separating initial and annual training requirements from certification requirements in the core regulations for residential child care programs. The Certification Committee is advocating for an online training program that could be made available at no-cost to residential child care programs.

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RCYCP Update

Senate Bill 344/House Bill 387 of the 2011 General Assembly Session requires the Governor's Office for Children ("GOC") to convene a Summer Study Workgroup to develop a plan for the implementation of the certification of Residential Child and Youth Care Practitioners ("RCYCPs"). The GOC is required to report on or before September 1, 2011, on the Workgroup's implementation plan. The plan must:

- (1) Determine whether it is feasible to implement the certification of RCYCPs in 2015, addressing:
 - (a) The costs of implementing certification, including:
 - The costs to residential child care programs of hiring and retaining RCYCPs who meet certification requirements:
 - (ii) Other costs incurred by residential child care programs to meet certification requirements; and
 - (iii) Any additional costs to the State Board to meet the 2015 implementation date.
 - (b) Any savings, that residential child care programs might realize from certification to help offset their costs, such as potential savings from reduced staff turnover.
 - (c) Efficient ways to reduce additional costs, such as "train the trainer" programs and common evaluation tools;
 - (d) The impact of additional costs, net of any savings and efficiencies, to residential child care programs on rates established by the Interagency Rate Committee; and
 - (e) Any additional funding sources, separate from the rates established by the Interagency Rate Committee that may be available to support additional costs.
- (2) Develop a plan for implementation of certification of RCYCPs, including:
 - (a) The adjustment in rates needed to support the additional costs of certification;
 - (b) Recommendations for addressing the needed rate increase in the State Budget;
 - (c) A recommendation for alternate date of implementation of certification if t he Workgroup determines that it is not feasible to implement the certification in 2015.

The Summer Study Workgroup has identified four focus groups to conduct this evaluation, and they are:

- Provider Focus—Chaired by Shelley Tinney—This focus group will review costs to residential child care programs for hiring and retaining direct care workers who are certified.
- Certification Focus—Chaired by Mary Rode-This focus group will examine the option of offering online virtual training
 and other alternatives, including "train the trainer" programs. In addition, this focus group will determine whether or
 not the 2015 implementation date is feasible.
- Rates/Funding- Chaired by Steve Sorin and Scott Finkelsen-This focus group will determine the impact of any possible
 additional costs and net savings and efficiencies to residential child care programs, including an examination of the
 rate-setting processes.
- State Board Processes-Chaired by Kim Mayer-This focus group will determine costs to the State Board to meet the 2015 implementation date.

The Summer Study Workgroup's materials are posted on the GOC's web site at http://goc.maryland.gov/RCYP_Summer_Study.html. The Summer Study Workgroup will meet from 1:00 pm to 4:00 pm at the Governor's Office for Children, Conference Room #3, on the following dates:

- · May 9, 2011
- May 23, 2011
- June 22, 2011
- · July 6, 2011
- · July 25, 2011

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Improving Health Through Health Literature

Monica McCann, MA, MPH

May 2011

Office of Minority Health and Health Disparities Maryland Department of Health and Mental Hygiene

The Institute of Medicine defines health literacy as "the degree to which individuals have the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions" (IOM, 2004).

A recent systematic review published by the U.S. Department of Health and Human Services, Agency for Health Research and Quality found that "differences in health literacy level were consistently associated with increased hospitalizations, greater emergency care use, lower use of mammography, lower receipt of influenza vaccine, poorer ability to demonstrate taking medications appropriately, poorer ability to interpret labels and health messages, and, among seniors, poorer overall health status and higher mortality." In addition, the evidence suggests that disparities in prescribed treatment outcomes may be explained partly by differences in the health literacy levels of health consumers.

Based on a Maryland population sample of the National Assessment of Adult Literacy, 30% of adults in the state have only a "basic" or "below basic" level of health literacy. These literacy statistics are a clear indicator that not every health consumer in Maryland is able to successfully navigate the health care system—meaning that individuals may not be able to access preventive services and treatment in a timely manner, to self-manage chronic health conditions and medications, or to understand the connection between everyay behaviors and one's individual health status. We must also bear in mind that even consumers who are highly literate may experience difficulty understanding and utilizing health information.

The issue of health literacy becomes even more complex when one considers the linguistic and cultural diversity of Maryland's population. Nearly 15% of Marylanders age 5 and older speak a language other than English at home; and one out of five Marylanders report that they speak English "not well" or "not at all" (U.S. Census Bureau, 2010). Effective communication between health care providers and consumers requires that health care providers have the tools and skills necessary to provide information and services in plain language and in a manner that is both understandable and culturally-appropriate for the consumer. Such efforts are essential if, as a health care community, we hope to:

- Increase timely access to care and preventive services;
- Improve the health status of the population through improved quality of care and health outcomes;
- Increase health consumer satisfaction and participation in their own care; and
- Ensure appropriate utilization of health care resources.

There is increasing energy in Maryland and around the nation on the issue of health literacy. In 2010, the U.S. Department of Health and Human Services (HHS) released the National Action Plan to Promote Health Literacy, which has in turn spurred development of a health literacy initiative in Maryland to mobilize stakeholders on the issue. In addition, the HHS National Partnership for Action has released a National Stakeholder Strategy for Achieving Health Equity, which includes strategies and several objectives geared toward health com-

munication and health literacy. Specifically, the National Stakeholder Strategy calls on health professionals and other stakeholders to become involved in the development and utilization of culturally and linguistically appropriate health communication materials, health literacy practice guidelines, and clinical tools to improve identification of and communication with consumers with limited health literacy. More information about joining the National Partnership for Action can be found at: www.minorityhealth.hhs.gov/npa/ or call toll free: 1-855-JOIN-NPA (1-855-564-6672).

In a similar manner, the Maryland Office of Minority Health and Health Disparities is currently collaborating with the Herschel S. Horowitz Center for Health Literacy at the University of Maryland-College Park to develop a "Cultural Competency and Health Literacy Primer"—to be released in 2012. The primer will include a compilation of training and educational resources for health professionals in Maryland who wish to become more effective in their interaction and communication with an increasingly diverse population of health care consumers. Stay tuned in the coming months for a request for public input—your feedback will be very helpful!

References:

Agency for Healthcare Research and Quality. 2011. "Health Literacy Interventions and Outcomes: An Updated Systematic Review." Available at: http://www.ahrq.gov/clinic/tp/lituptp.htm

Buonasera AK, Baer JD. 2006. "Adult Literacy in Maryland: Results from the 2003 State Assessment of Adult Literacy." American Institutes for Research.

Institute of Medicine. 2004. "Health Literacy: A Prescription to End Confusion." Washington, DC: National Academies Press.

U.S. Census Bureau. 2010. "Language Use in the United States: 2007." Available at: http://www.census.gov/prod/2010pubs/acs-12.pdf

Sample of Free Health Literacy Training Resources:

- -Group Health Research Training Institute. PRISM (Program for Readability in Science and Medicine) Online Training. Web location: http://www.grouphealthresearch.org/capabilities/ readability/readability_home.html
- New York New Jersey Public Health Training Center. Practicing Cross-Cultural Communication.

 Web location: http://www.nynj-phtc.org/cc2/default.cfm or
- http://www.nynj-phtc.org/pccc.cfm

 U.S. Department of Health and Human Services, Health Resources and Services Administration. Unified Health Communica-

tion 101: Addressing Health Literacy, Cultural Competency, and

Limited English Proficiency. Web location: http://

newuserreg_1.asp

www.hrsa.gov/healthliteracy/training.htm
 U.S. Department of Health and Human Services, National Institutes of Health. NIH Plain Language Training. Web location: http://plainlanguage.nih.gov/CBTs/PlainLanguage/

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We're on the Web! example.com

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



Congratulations!

The State Board welcomes the following individuals who have been certified since our last newsletter:

- Samantha Janeski
- Kevin McLeod
- Adesua Okoh
- Ayusha Pradhan
- Roland Riviere

Special Notice

The newsletters published by the Maryland State Board for the Certification of Residential Child Care Program Professionals are considered an official method of notification to residential child care professionals. *These newsletters may be used in administrative hearings as proof of notification.* Please read them carefully.

If you have an upcoming event or story idea, please send an email message to mayerk@dhmh.state.md.us