Guidelines for Developing a Private Provider Training Curriculum for Residential Child and Youth Care Practitioners

Thank you for your interest in becoming a Private Provider Trainer for the Residential Child and Youth Care Certification program. As you know, effective October 1, 2015, all Residential Child and Youth Care Practitioners must complete a Board-approved training program to become certified in Maryland.

The Board has developed a comprehensive online training curriculum consisting of 7 modules that are designed to ensure trainees have the required fundamental working knowledge in the following areas:

1. The Residential Child and Youth Care Practitioner;
2. Child and Adolescent Development;
3. Communication Skills;
4. Life Skills Development;
5. Trauma;
6. Legal and Ethical Issues in Residential Care; and
7. Standards of Health and Safety.

Below you will find an outline of the information included in these 7 modules. It is the Board’s expectation that private providers wishing to develop their own curriculum will include all of the elements listed in this outline. While providers may wish to add information that is not listed here, curriculums that do not include all of the listed elements will be considered incomplete.

The Board will review each training curriculum to determine conformity to the uniform framework and core competencies for direct care practitioners. In addition to a curriculum that addresses each module, your application packet must include facilitator notes, a detailed outline of each training module, details of the activities that trainees will be expected to participate in, and the number of training hours for each module. (The curriculum must consist of a minimum of 20 contact hours of training.)
Module 1
The Residential Child and Youth Care Practitioner

1. What is residential care
   a. Continuum of care – different types of care in Maryland (e.g., psychiatric rehabilitation services, home-based treatment services)
   b. Components of residential care (e.g., education, recreation etc.)
   c. Types of residential child care programs (e.g., alternative living units, emergency shelter care etc.)

2. History of residential care
   a. Early America- poor houses
   b. Mid 1800s – orphan asylums
   c. Early 1900s – children’s rights movement

3. Current residential care
   a. Strengths-based approach

4. How youth come into care
   a. Common reasons for residential care placement
   b. Type of youth who come into care (e.g., complex needs, problems, functional levels)

5. Outcome goals for intervention
   a. The goals of residential treatment (e.g., functioning at a higher level etc.)

6. Challenges with residential youth
   a. Challenges in working with residents (e.g., lack of motivation etc.)
   b. Feelings of youth that contribute to challenges (e.g., sense of worthlessness etc.)

7. The role of the RCYCP
   a. Role of the RCYCP (e.g., regulate distance/boundaries, help youth develop independence etc.)
   b. Characteristics of RCYCP (e.g., nurturer, role model etc.)
   c. Skills for the RCYCP (e.g., communication, cultural competence etc.)
8. Individual Service Plans/Treatment Plans
   a. Components of individual service plan/treatment plan (e.g., evaluation, behavior plan etc.)
   b. How often plan is reviewed, revised
   c. Example of plan
   d. Behavior plan (what it is, why used etc.)
   e. Example of plan

9. Therapeutic setting
   a. Components of a therapeutic environment (e.g., normalization, individualization etc.)

10. Positive developmental assets for youth
    a. What RCYCPs do to help youth become competent, caring, and responsible (e.g., offer support, empower youth etc.)

11. Professional guidelines and ethical standards
    a. COMAR regulations and sanctions
    b. North American Child and Youth Care Professionals ethical guidelines

12. Burnout and compassion fatigue
    a. What is burnout
    b. Characteristics of burnout
    c. Consequences of burnout
    d. What is compassion fatigue
    e. Characteristics of compassion fatigue
    f. Strategies for avoiding burnout and compassion fatigue
Module 2
Child and Adolescent Development

1. Why it is important to learn about child and adolescent development (nature and nurture)
2. Types of development (physical cognitive, social and emotional)
3. The first 2 years (0-2) physical development
4. The first 2 years cognitive development
5. The first 2 years social and emotional development
6. Attachment
   a. What it is
   b. Types of attachment (e.g., secure, insecure etc.)
   c. Characteristics of different attachment types
7. Early childhood (2-6) physical development
8. Early childhood cognitive development
9. Early childhood social and emotional development
10. Parenting styles (authoritarian, authoritative etc.)
    a. Parenting style effect on child outcomes (how kids turn out depending on style)
11. Early childhood moral development (Kohlberg stages and levels)
    a. Heinz dilemma
12. Early childhood sexual development
    a. Gender awareness
13. Middle childhood (6-11) physical development
14. Children with special needs
    a. Definition
    b. Causes
    c. IEPs
15. ADHD
    a. Types
    b. Causes
    c. Treatments
16. Conduct disorder
   a. What it is
   b. How it is treated
   c. Co-occurrence of other conditions with conduct disorder

17. Autism spectrum disorders (ASDs)
   a. What it is
   b. Characteristics
   c. Causes
   d. Treatment

18. Learning Disabilities
   a. What it is
   b. Characteristics
   c. Most common LD
   d. Causes
   e. Treatment

19. Emotional disturbances
   a. What it is
   b. Characteristics
   c. Causes
   d. Treatment

20. Middle childhood cognitive development
   a. Learning styles (visual, auditory, kinesthetic)

21. Middle childhood moral development

22. Middle childhood social and emotional development

23. Adolescence (12-18) physical development
   a. Puberty
   b. Body image
   c. Eating disorders (anorexia and bulimia)

24. Adolescence sexual development

25. Adolescence cognitive development
26. Adolescence moral development

27. Adolescence social and emotional development
   a. Depression and suicide
      i. Types (bipolar type 1 and type 2, cyclothymia)
      ii. Signs and Symptoms
      iii. Causes
      iv. Gender differences
      v. Treatment
   b. Anxiety disorders
      i. Separation anxiety
      ii. Phobia
      iii. Social anxiety
      iv. OCD
      v. Symptoms, causes, treatment

28. Sexually acting out
   a. What it is
   b. Why it happens
   c. Range of behaviors
   d. Group 1: normal sexual exploration
   e. Group 2: sexually reactive
   f. Group 3: extensive mutual sexual behaviors
   g. Group 4: children who molest
   h. Treatment
29. LGBTQ Youth

a. Terminology (sexual orientation, gender identity, gay, lesbian, bisexual, transgender, questioning)
b. “Coming Out” – what it means, why it is a risk
c. Experiences of LGBTQ youth (e.g., more likely to experience depression, harassment etc.)
d. Statistics of LGBTQ youth (education, violence/bullying, substance abuse, homelessness, suicide, LGBTQ youth of color)
e. Myths and misconceptions about LGBTQ youth (e.g., a person can become gay by associating with gay people)
f. Statistics about LGBTQ youth in residential care (over-representation and why there is over-representation)
g. How LGBTQ youth enter the system (e.g., rejection, neglect/abuse, runaway, throwaway etc.)
h. LGBTQ history of maltreatment in residential care
i. Developmental tasks for LGBTQ youth (e.g., regular developmental tasks + harassment and victimization etc.)
j. Needs of LGBTQ youth in residential care (e.g., support, respect etc.)
k. What RCYCPs should not do (e.g., condemn, pathologize, sermonize etc.)
l. What RCYCPs can do (e.g., use inclusive language etc.)
m. What agencies can do (e.g., prohibit harassment and discrimination etc.)

n. Transgender youth
   i. Needs
   ii. Treatments

30. Developmentally appropriate programming for at-risk youth (e.g., using knowledge of youth to factor into how RCYCP works)
Module 3  
Communication Skills

1. Communication
   a. What is it
   b. Why is it important for RCYCPs
   c. Communication in relationships (communicating positive thoughts and feelings and negative ones)
   d. Communication levels (content and process)
   e. Communication parts (sending and receiving)
   f. Listening styles
      i. The faker
      ii. The dependent listener
      iii. The interrupter
      iv. The self-conscious listener
      v. The intellectual
      vi. The attentive listener
   g. Barriers to communication (physical/environmental, situation, psychological etc.)
   h. Family influences (activity choices and interests etc.)
      i. Internalization of parental values and beliefs
      ii. How parents communicate love and approval (e.g., through actions, concern etc.)
      iii. Impact of criticism and rejection
      iv. Outcomes for children who are emotionally deprived
   i. 7 family patterns (e.g., open/honest/tactful, superficial, one-sided etc.)
   j. Characteristics related to communication patterns of parents of residential youth
   k. Characteristics of residential youth with regard to communication (e.g., language and communication challenges)
I. Communication skills
   i. Empathy and empathic listening
   ii. Reflecting feelings
   iii. Consensual validation
   iv. Paraphrasing
   v. Clarifying
   vi. Non-verbal behavior
   vii. Asking questions
   viii. De-escalation
   ix. I-messages
   x. Non-verbal behavior
   xi. What not to do
   xii. Asking questions (incisive)
   xiii. De-escalation

2. Building relationships
   a. With youth
   b. With family of youth
   c. Family engagement

3. Boundaries
   a. What they are
   b. Boundary violations – examples
   c. Challenges
   d. Power differentials
   e. Boundary tips

4. Power struggles/resistance
   a. What they are
   b. Why they happen
   c. What to do
   d. What not to do
5. Cultural competence
   a. Cultural competence continuum (cultural destructiveness, cultural incapacity etc.)
      i. What it is
      ii. How to achieve it in general and as an RCYCP
      iii. Example of cultural competence in residential care (Warren Youth Services)
Module 4
Life Skills Development

1. Daily living skills by age (what different age groups are capable of doing in terms of daily living skills and what adults should do, e.g., model skills)
   a. Toddlers (e.g., putting away toys etc.)
   b. Early childhood (e.g., showering themselves etc.)
   c. Middle childhood (e.g., time management etc.)
   d. Adolescence (e.g., school projects etc.)

2. Daily living skills (information about the topic and how RCYCPs can help to teach youth about them; also contains helpful resources e.g., websites)
   a. Nutrition
      i. Recommendations for healthy and nutritious eating
   b. Meal planning and preparation (e.g., menus etc.)
   c. Food storage (proper and safe storage of food)
   d. Food safety (e.g., hand washing, keeping cooking areas clean etc.)
   e. Setting the table (how to do it properly)
   f. Table manners (what is polite and rude)
   g. Household cleanliness (what it means, how to do it)
   h. Home safety (ways to stay safe at home e.g., don’t answer door to stranger, carbon monoxide detector etc.)
   i. Independent travel (how to get around on public transportation)
   j. Obtaining personal documents (e.g., how to access social security cards, driver’s license etc.)
   k. Money management
      i. Needs vs. wants
      ii. Saving money
      iii. Budgeting
      iv. Banking (banks, accounts, checkbooks, ATMS, credit cards etc.)
      v. Shopping on a budget/comparison shopping (what it is, how to do it)
I. Housing (for older youth who will transition to independent living)
   i. Preferences (e.g., what do they want, what is available, what is in their budget etc.)
   ii. Planning to move out (e.g., saving money, steady income, support system etc.)
   iii. Options (e.g., apartments, houses, dorms etc.)
   iv. Leases (what they are)
   v. Finding housing (e.g., newspapers, ads etc.)
   vi. Subsidized housing (what it is, how to find it)

m. Filing taxes

n. Self-care
   i. Understanding the legal consequences of unlawful behaviors (e.g., what happens if they speed etc.)
   ii. Personal hygiene (e.g., what is good hygiene, how to help with hygiene issues etc.)
   iii. Staying healthy (e.g., exercise, eating right, sleeping, regular check-ups etc.)
   iv. What to do if they are sick (e.g., how to care for themselves, when to see a doctor etc.)

o. Health insurance (e.g., how to obtain it, etc.)

p. Personal safety (e.g., safety at home, safety outside of the home, cyber safety, safety of their bodies etc.)

q. Healthy relationships (e.g., what constitutes a healthy relationship vs. unhealthy relationship, abusive relationships etc.)

r. Sexual activity
   i. STIs (sexually transmitted infections)
   ii. Protection against infection

s. Work and study skills (e.g., how do they work best etc.)
1. Career planning
   i. Importance of education
   ii. Job hunting
   iii. Applying for jobs
   iv. Interviewing
   v. Maintaining employment (e.g., conducting themselves at work etc.)

3. Social skills
   a. Importance of
   b. What they are
   c. What the lack of social skills can mean (e.g., acquisition deficit, fluency deficit etc.)
   d. Specific skill sets (e.g., listening, starting a conversation, apologizing, solving a disagreement, alternatives to aggression etc.)
   e. Things to keep in mind while teaching social skills (e.g., people have different learning styles, more invested if they choose their own goals etc.)

4. Job attainment skills
   a. Resume writing (resources from Howard County Public School System)

5. Developmentally appropriate activities and recreation (reiteration from Module 2 about what is appropriate and not appropriate – developmental age is key)

6. Motivation techniques to encourage youth participation in activities (e.g., understanding the meaning of resistance, frustration, and acting out etc.)

7. Assisting youth in the completion of school assignments (e.g., study habits and organizational skills)

8. Families and caregivers as partners in decision-making and practice (e.g., engaging and involving families)
   a. Barriers to family and caregiver participation in treatment (e.g., past negative experiences with educational and mental health service systems, parent overwhelm/stress etc.)
   b. Engaging families (e.g., building rapport, developing a collaborative relationship etc.)
Module 5
Trauma

1. Maryland Code: Resident’s Bill of Rights (statute 8-707)
   a. What are the rights for youth in residential care?
   b. Description of contents required in residential child care “Handbook of Policies”

2. Overview of standards for residential child care programs (COMAR Title 14: Subtitle 31: Chapter 06)
   a. Residential child care program personnel policies (what is included in the content, e.g., annual performance evaluations, communicable diseases, confidentiality of records, description of job responsibilities etc.)
   b. Code of conduct
   c. Responsibilities of direct care staff
   d. Maintenance of physical plant
   e. Policies and procedures for emergencies and general safety (brief – in depth coverage in Module 6)
   f. General program requirements (e.g., maintaining communication with families, child grievance etc.)
   g. Basic life needs (e.g., nutrition, sleep, personal hygiene etc.)
   h. Educational and life services (e.g., education, life skills training, work readiness, recreation etc.)
   i. Health care (e.g., general health services, medication management, dental care etc.)
   j. Behavioral interventions, strategies, and supports (e.g., what they are, what is allowed etc.)

3. What is child abuse and neglect
   a. Definitions
   b. What to look for
4. Abuse Reporting Requirements
   a. Mandated reporting
   b. Process of reporting
   c. Good faith law
5. Confidentiality in residential care
   a. COMAR
   b. HIPAA
6. Ethics in residential care (recap from Module 1)
   a. COMAR
   b. Standards for Practice of North American Child and Youth Care Professionals
7. Permanency planning
   a. What it is
   b. What are the goals
   c. When is a permanency plan other than reunification established
Module 6
Legal and Ethical Issues in Residential Care

1. Universal precautions and infection control procedures
   a. Risk assessment
   b. Hand hygiene
   c. Environment: physical (prevention of infection and disease)

2. COMAR policies and procedures for health and safety
   a. General safety requirements
   b. Fire drills
   c. Emergency plans

3. Red Cross Disaster Safety
   a. Chemical emergencies
   b. Earthquakes
   c. Fire safety
   d. Flood safety
   e. Hurricanes
   f. Poisoning
   g. Thunderstorms
   h. Tornadoes
   i. Winter storms
   j. Terrorism
   k. Management of life threatening situations (break-ins, intruders, and disruptive visitors)

4. COMAR “child absent without leave” policy

5. Cultural sensitivity to nutrition

6. Food allergies
   a. Typical allergies
   b. Description of reactions
   c. What to do in the event of an allergic reaction
7. Common childhood illnesses
   a. Chickenpox
   b. Colds
   c. Flu
   d. Sinus infection
   e. Cough
   f. Strep throat
   g. Croup
   h. Asthma
   i. Diarrhea
   j. Lice
   k. Bed bug bites
   l. Pinkeye
   m. Scabies
   n. Ringworm
   o. Poison ivy

8. COMAR policies and procedures regarding medication
Module 7
Standards of Health and Safety

1. Neglect
   a. Definitions
      i. Physical
      ii. Medical
      iii. Educational
      iv. emotional
   b. Effect of neglect on the brain

2. Child physical abuse
   a. Effects on children
   b. Effects on adults who were abused as children

3. Child sexual abuse
   a. Definition
   b. Effects on children
   c. Effects on adults who were abused as children

4. Family violence
   a. IPV/domestic violence
   b. Impact of family violence on young children
   c. Impact of family violence on parents and how that trauma then affects their
      interactions with their children

5. Complex trauma on children

6. The impact of early adversity on children’s development

7. PTSD
   a. Key symptoms for children
   b. Other common diagnoses for children in the child welfare system

8. The impact of loss, separation, and out-of-home placement on children and youth
   a. The trauma associated with removal from the home
Part II of the trauma module: uses training materials from the National Child Traumatic Stress Network (NCTSN)

1. What is trauma-informed care
2. What is trauma
3. Trauma and the brain
   a. The brain’s response to fear
4. Situations that can be traumatic
5. Types of trauma
   a. Acute
   b. Chronic
   c. Complex
   d. Historical
   e. Neglect
   f. Child traumatic grief
6. Traumatic stress reactions
7. Potentially traumatizing events in juvenile detention and other residential settings
8. Prevalence of trauma in the child welfare population
9. Traumatic experiences, traumatic stress reactions, trauma and loss reminders using a case example
10. Behaviors related to trauma
11. Resiliency
12. Trauma’s impact on development by stage (young children, middle childhood, adolescence)
13. “Invisible suitcase” discussion using case example (beliefs about him/herself, beliefs about others, beliefs about world, impact on development)
14. Coping strategies (positive and negative)
15. Trauma-informed safety plan
16. COMAR 14.31.06.15 Safe Environment plan
17. Vicarious trauma for the RCYCP
18. Ways to reduce stress through self-care
19. What can the RCYCP do when working with traumatized children and youth