

National Child and Youth Care Practitioner Professional Certification: Promoting Competent Care for Children and Youth

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This article provides an overview of the history, development, and conceptual framework guiding a national certification initiative for child and youth care workers. Summarized are descriptions of three certification assessment measures (supervisor assessment, situational judgment certification exam, and portfolio assessment), integrated with results from an international pilot validation study. The certification program is the first national effort to identify and assess underlying child and youth work competencies that transcend work setting (community-based to out-of-home care), population characteristics (diagnosed mental health concerns, experiencing child abuse, etc.), and age of the child/youth (early childhood through adolescence). The authors assert, building on a seven-year collaborative effort to establish the certification program, that it is time to transform the child and youth serving workforce crisis into an opportunity to bring together the varied child- and youth-caring fields into a united profession that has a rich knowledge and skill base of international scope.

Over the last decade, professional associations, national advocacy groups, government agencies, and a variety of researchers have documented an urgent need to focus on the child- and youth-serving workforce. Concerns pertaining to employee recruitment, training, transfer of training and staff retention are frequently cited. The lack of a well-prepared workforce to supply the increasing numbers of workers needed in child and youth care programs is having a significant adverse impact on the amount and quality of services available. Lack of adequate training, preparation, and career development opportunities are significant factors contributing to high staff turnover and safety concerns that often lead to poor service outcomes, litigation, and program closure due to licensing violations (Alliance for Children and Families, American Public Human Services Association, & Child Welfare League of America [CWLA], 2001; Alwon & Reitz, 2000; Annie E. Casey Foundation, 2003; Center for Youth Development and Policy Research, 2001; CWLA, 2004; Curry, McCarragher, & Dellmann-Jenkins, 2005; Eckles, Carpenter-Williams, Curry, Mattingly, Rybicki, Stuart, Bonsutto, Thomas, Kelly, VanderVen, Wilson, Markoe, Wierzbicki, & Wilder, 2009; Levine, 2005).

Efforts to promote a competent and stable workforce and create career development opportunities within child and youth services has emerged as important human resource contributions (Curry & Cardina, 2003; Rycraft, 1994). Career satisfaction has emerged as an important retention factor (McGowan, Auerbach, & Strolin-Goltzman, 2009). Curry et al. (2005) found organizational support for professional development associated with long-term retention in child welfare workers, and suggested worker competence may predict long-term retention. Professional commitment and adequate preparation (e.g., education and training) have been cited by many as contributing to job satisfaction, higher quality of care, and increased

Additional information regarding the Child and Youth Care Certification Board, the Standards of Practice/Competencies for Professional Child and Youth Work Practitioners, and Code of Ethics can be obtained on the Association for Child and Youth Care Practice website (www.acycp.org) or by calling the national office at 979-764-7306. Additional information regarding the pilot testing of the certification exam can be obtained from the 2007 Proceedings of the National Human Services Training Evaluation Symposium, online at http://calswec.berkeley.edu/CalSwec/Publications_3.html or in the 2009 issue of *Journal of Child and Youth Care Work*.

retention (Galinsky, Howes, Kontos, & Shinn, 1994; Hartje, Evans, Killian, & Brown, 2008; Kontos, Howes, Shinn, & Galinsky, 1995). Caregiver competence is routinely reported as resulting in higher quality of care (Burchinal, Howes, & Kuntos, 2002; Cost, Quality, and Child Outcomes Study Team, 1995; Gable & Halliburton, 2003; Knoche, Peterson, Pope Edwards, & Jeon, 2006).

The importance of a stable and competent child and youth serving workforce for promoting positive outcomes for children and youth, combined with the current difficulties of recruiting and retaining well-prepared, competent practitioners, has created what many call a workforce crisis (Alwon & Reitz, 2000; Krueger, 2007a, 2007b; Mattingly & Thomas, 2006).

This article describes a major initiative that intends to help turn the workforce crisis into an opportunity to transform the varied child- and youth-caring fields into a united profession based on a long-established, yet ever growing, developmental-ecological knowledge base and international collaboration. A brief overview of the history, development, and conceptual framework guiding the certification initiative will be followed by a description of the assessment measures, integrated with results from the pilot validation study. Future directions will also be discussed.

Defining Child and Youth Care Practice

The following is a widely adopted description of child and youth care practice developed by the International Child and Youth Care Consortium:

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 requirements 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. (National Organization of Child Care Worker Associations, 1992, p. 83)

Many perceive the child and youth caring field development as scattered accomplishments in separate fields of practice, however, this description of the field implies that child and youth work practice involves those who work with children and youth of various populations, at various ages, and in various settings. This certification initiative is the first national effort to credential those who work with children and youth in the broader field. It is an attempt to unify the varied child and youth services into one profession, founded on a common knowledge and skill practice base. Although precise numbers are difficult to obtain, a report from the Annie E. Casey Foundation (2003) estimates that by this definition, the U.S. child and youth care workforce could be larger than all of the other human service populations combined (5.5 million child and youth care workers, including part time). Thus, the potential to make a significant impact on the well-being of children, youth, and families in the United States—and perhaps internationally—is unprecedented.

The North American Certification Project

The North American Certification Project (NACP), administered by the Child and Youth Care Certification Board (CYCCB) and sponsored by the Association for Child and Youth Care Practice (ACYCP),

is the result of years of work by many North American child and youth care professionals. In 1992, North American child and youth care leaders gathered at the University of Wisconsin–Milwaukee, established the International Leadership Coalition for Professional Child and Youth Care (ILCPYC), and identified professional certification as a major goal. A second meeting of the ILCPYC with additional youth development leaders in 1999 and a third meeting in 2003 resulted in a plan to develop a certification process.

Between 2000 and 2007, the ACYCP, a national organization that promotes professional child and youth care practice in the United States, brought together a large international cadre of child and youth care professionals to study and address the workforce crisis. This international team developed a certification process at the professional level (for a listing of contributors, see Eckles et al., 2009, or www.acycp.org).

Emphasis for the certification program included the full range of knowledge, skills, and attributes considered necessary for professional practice across practice environments. This focus was chosen to demonstrate the interrelatedness of the various settings in which work is delivered, to delineate the fundamental principles that underlie child and youth care practice, and to describe fully functioning child and youth care professionals. Using the broad description of the field of child and youth care practice (defined above), the NACP identified requisite knowledge and skills for professional practice and established methods to assess competence. This process involved a meta-analysis of the field's articulation of competencies. New competencies were developed where gaps were identified.

The final list of competencies incorporated what workers currently value, know, and do, as well as what best practice standards indicate that they *should* value, know, and do, including competencies pertaining to the code of ethics for North American child and youth care workers. Determination of the final competency list involved several work groups and several years of discussion and refinement. The competencies were organized into the following five domains: (1) professionalism, (2) cultural and human diversity, (3) applied human development, (4) relationship and communication, and (5) develop-

mental practice methods (Curry, Qaqish, Carpenter-Williams, Eckles, Mattingly, Stuart, & Thomas, 2009; Eckles et al., 2009; for a more detailed description of the competency and code of ethics development process, see Mattingly, Stuart, & VanderVen, 2002).

Assessing Child and Youth Care Professional Competence

Determining how to assess competence in a field with varied practice settings and multiple facets of competence was a challenge approached by the NACP assessment committee. The committee developed a multiple measure assessment strategy that included a scenario-based examination, supervisor assessment, and electronic portfolio, coupled with an applicant's submission of professional references, professional memberships, employment history, education, and extensive training documentation. This was, arguably, the most difficult aspect involved in developing the certification program.

Much time was spent researching the best methods for assessing child and youth care knowledge and skills in a cost efficient manner, sorting the competencies as to which assessment method would be most useful (examination, supervisor assessment, or portfolio), and ultimately writing the 19 scenarios and 100 questions included in the draft exam, based on scenarios submitted from the field. The committee developed a program that assesses every knowledge and skill competency by at least one method and uses multiple assessment methods for a significant number of competencies. A brief description of the three major assessment strategies follows (for more, see Mattingly & Thomas, 2004).

Assessment Instrumentation

The certification process predominantly emphasizes three assessment approaches: (1) supervisory assessment of worker competence on the job, (2) situational judgment exam, and (3) portfolio.

Supervisory Assessment of Worker Performance

Supervisory assessment of worker performance is one of the most frequently used measures of employee performance. Although the research has noted limitations of its effectiveness (e.g., leniency bias, halo effect, inconsistency between supervisors), when combined with other indicators of performance, it is an important measure to include in an overall assessment of the worker's on-the-job competence, especially when direct assessment is not feasible (Dohrenbusch & Lipka, 2006; Gonsalvez & Freestone, 2007; Larson, Day, Howarth, Clark, & Vogel, 2003; Nathan & Alexander, 1988; Sundvik & Lindeman, 1998).

Table 1

Examples of Competencies Assessed by Supervisor for Domain I (Professionalism)

Number	Description
IB.1.b2	Practitioner demonstrates the ability to <i>give and receive constructive feedback</i>
I.B.1.c.1.a.	Practitioner is <i>knowledgeable of and conforms to agency work rules</i> relating to <i>attendance, punctuality, appearance, sick and vacation time, and workload management</i>
I.B.1.c.1.b.	Practitioner is a <i>positive representative</i> of the organization as evidenced by <i>personal appearance and behavior</i>
I.B.3.a. 1 & 2.	Practitioner demonstrates helpful <i>personal development and self-care</i> practices as evidenced by recognition of <i>personal strengths, limitations, feelings, and needs</i> and the ability to <i>separate personal from professional issues</i>
I.B.4.d.	Practitioner conforms to professional <i>ethical standards, principles, and values</i>
I.B.5.d.	Practitioner demonstrates an understanding of <i>proper procedures for reporting and correcting noncompliance</i>
I.B.6.f.	Practitioner ensures that the views of <i>clients are heard and considered regarding decisions that directly affect them</i> , by acting as an advocate for the children, youth, and families they serve

Note: The complete Child and Youth Care Certification Board competency document is available at www.acycp.org/childcarecompr.pdf.

The CYCCB uses a five-choice rating scale, ranging from “consistently demonstrates this competency” to “does not demonstrate this competency,” as one of the three major measures of worker competence. This must be completed by two supervisors who have extensive and direct knowledge of the applicant’s work with youth. Table 1 provides examples of competencies from the professionalism domain assessed with this instrument.

As part of the pilot certification exam validation study, an abridged version of the supervisor assessment instrument was developed. Supervisors of each of the child and youth care worker examinees were requested to complete a six-item, five-choice survey assessing the worker’s on-the-job competence. One item pertained to each of the five major competency domains, and one item referred to the workers’ overall competence. The item anchor descriptors ranged from “consistently demonstrates competence” to “does not demonstrate competence.” A composite competence score (the sum of the six items) was used as a concurrent criterion measure of job performance (Chronbach’s $\alpha = .94$). This composite measure was correlated with the certification exam score to provide an indication of criterion validity, discussed later.

The CYCCB plans to conduct ongoing additional research pertaining to full supervisory assessment instrument. For example, interrater reliability information (since a candidate must submit two supervisor assessments) will be maintained. Relationships between certification exam scores and supervisor ratings will continue to be explored.

Certification Exam

A predominantly situational judgment exam that requires practice judgments from the examinee based on case studies elicited from the field was developed. A situational judgment approach (SJA) to assessment emphasizes the use of realistic scenarios, typically asking test-takers to identify the best alternative among the choices offered. The most correct answer for each item is determined by a panel of subject matter experts. Meta-analysis of SJA research stud-

ies indicates a number of advantages over other assessment approaches, including the following:

- SJA has a high degree of face and content validity, assessing job relevant behaviors.
- SJA has reduced levels of adverse impact, by gender and ethnicity, compared to cognitive ability tests.
- SJA is administered easily, as a paper and pencil test or as an online assessment.
- SJA can measure a variety of constructs, including interpersonal competencies crucial in human service areas such as child welfare (Chan & Schmitt, 2002; Clevenger, Pereira, Wiechmann, Schmitt, & Harvey, 2001; McDaniel & Nguyen, 2001; McDaniel, Morgeson, Finnegan, Campion, & Braverman, 2001).

In accordance with SJA, a panel of child and youth work experts identified items best addressed by the exam and subsequently determined the number of items (one to three) for each competency based on their importance. After completing a draft 100-item exam, another expert panel reviewed the exam with the goal of identifying cases and items to eliminate or modify due to possible cultural bias. The panel also made recommendations regarding the readability of the case studies and exam items. The test construction team incorporated many of these and validated the exam with a pilot test. Meanwhile, another expert panel—including several of the test construction team members—was established and charged with two tasks: (1) choosing the “most correct” answer for each item and (2) estimating the probability for each item of the “minimally competent” child and youth care worker at the professional level answering the item correctly. While 9 experts assessed correct answers (overall agreement percentage of 87.2%), 10 panel members were involved in the modified Angoff probability ratings to help determine a recommended cut score for the exam. The following is an example of a case and item that requires practice judgments pertaining to the competency from the Standards of Practice/Competencies for Professional Child and Youth Work (Curry & Eckles, 2009).

Competency IB4c

Apply specific principles and standards from the relevant code of ethics to specific problems.

You are a practitioner working in an emergency shelter that primarily serves homeless youth between 14 and 21 years old. Legally, in this state, runaways under the age of 16 must be reported to authorities. One evening a young-looking

female youth comes in and makes inquiries about the services available in the shelter. She tells you she is 18, but you strongly suspect she is much younger, possibly 13 or 14. As you interview her, she reveals that she ran away from home about a year ago and has been working as a prostitute for the past six months. She refuses to tell you her real name or where she is from. When you ask her what she needs from the shelter, she tells you that she could use a place to stay overnight. As a practitioner, you

- have a legal obligation to talk her into staying at the shelter until a longer-term program can be worked out or she can be reconnected with her family, but no obligation to contact the authorities;
- have a legal obligation to make the shelter services available to her and check to be sure she is aware of the risks involved in her lifestyle;
- have a professional obligation to contact the appropriate authorities if she leaves the shelter; or
- have no legal or ethical obligation beyond making services available to her that she has specifically asked for.

The development and pilot administration of the National Child and Youth Care Worker Certification Exam involved ongoing review by national and international child and youth worker experts, as well as extensive statistical item analysis by the research team. The exam was administered to 775 participants from 29 sites in six states and two Canadian provinces during the pilot testing validation study in 2006. Administering the exam involved participants from both community-based and out-of-home care practice sites (see Table 2). Of their supervisors, 80% completed the abridged supervisor assessing workers' on-the-job competence.

Item analyses included (1) reliability analysis (Chronbach's alpha = .90), (2) difficulty analyses, (3) discrimination analyses, (4) distracter analyses, (5) differential item functioning analyses (to identify

Table 2

North American Certification Project Validation Study Participant Sample

	Number	Percentage
Sex		
Male	301	39.0
Female	470	61.0
Race		
African American	337	44.9
American Indian or American Indian First	5	0.7
Asian	7	0.9
Caucasian	320	2.7
Hispanic	56	7.5
Multiethnic (more than one race)	23	3.1
Other	2	0.3
First language (English)	749	97.0
Country		
United States	735	95.3
Canada	36	4.7
Practice setting (education)		
Early childhood	127	16.5
Public and private schools	109	14.1
Practice setting (out-of-home care)		
Foster homes	37	4.8
Residential treatment	355	46.0
Psychiatric hospitals	21	2.7
Medical hospitals/clinics	12	1.6
Physical disabilities	10	1.3
Juvenile corrections	58	7.5
Emergency shelters	96	12.5
Basic residential care	127	16.5
Transitional living	58	7.5
Developmental disabilities	19	2.5
Practice setting (community-based services)		
Afterschool programs	50	6.5
Prevention/intervention programs	122	15.8
Street outreach	35	4.5
Developmental disabilities	22	2.9
Early intervention	45	5.8

Continued on next page

Table 2 cont.

In-home detention programs	6	0.8
Physical disabilities	13	1.7
Recreation	38	4.9
In-home family care and treatment services	45	5.8
Organizations (YMCA, scouts, etc.)	38	4.9
Clinic-based day treatment services	26	3.4
Practice settings (other)	57	7.4
Type of position		
Direct-care worker	370	48.7
Educator	38	5.0
Supervisor	102	13.4
Administrator	62	8.2
Counselor	84	11.1
Therapist	6	0.8
Foster parent	1	0.1
Other	93	12.2
Professional CYC		
Yes	729	95.0
No	33	4.3
Education		
None	99	13.6
Associate	97	13.4
Baccalaureate	263	36.2
Masters	87	12.0
Doctorate	2	0.3
No degree but coursework	177	24.4
	Mean	SD
Age	37.35	10.95
Years of experience	10.43	8.05

N = 775. Settings are not mutually exclusive. Respondents may have selected more than one setting. Also, the relatively large number of participants indicating "other" for type of position is in part due to blended/hybrid positions (e.g., lead worker with supervisory responsibilities, social worker/direct care worker).

possible item bias), and (6) content analysis of the examinee comments organized by item and case study. Consistent with other SJA research, results from the pilot study indicate that higher exam scores are associated with better worker on-the-job performance in all domains. A significant correlation of .26 was found between the exam scores and the composite supervisor assessment of worker competence on the job ($p < .001$). The correlation was most likely attenuated due to range restriction and little variability in the supervisory assessment ratings. Ratings indicating that workers failing to demonstrate competence were almost nonexistent. Variability of the ratings mostly ranged from ratings of three (inconsistently demonstrates competence) to five (consistently demonstrates competence). This correlation falls within the range typically reported for tests using a SJA (.20 to .40 range). It should be noted, however, that McDaniel et al. (2001) estimate the true validity of tests using a SJA in predicting performance related criteria to be significantly higher (near .56) when corrected for range restriction and criterion unreliability. This is among the best validity coefficients, when compared to personnel selection instruments (Clevenger et al., 2001).

In addition to the significant correlation between the exam scores and the supervisor assessments, those who have taken the exam overwhelmingly indicate that it accurately assesses important aspects of child and youth work across practice settings. For example, 90% of respondents in the pilot study perceived that the items in the exam accurately assess important aspects of child and youth care work and the case examples provide realistic samples of child and youth care work. This strongly indicates that the exam measures the essential elements of child and youth care work.

Using feedback from the pilot study, revisions were made to the exam prior to implementation of the certification program in 2008. Currently, the exam consists of 75 situational judgment multiple choice items pertaining to 17 case studies that were elicited from a variety of practice settings. Curry et al. (2009) share a comprehensive review of the exam development, pilot testing, and validation process. The exam is currently being administered in both "paper and pencil" format and electronic Web-based administration at approved proctor sites.

Portfolio Assessment

Competence in some areas was determined to be best ascertained by a qualitative portfolio assessment approach. The portfolio approach is becoming an increasingly prevalent tool for learning and assessment (Driessen, Overeem, Van Tartwijk, Van Der Vleuten & Muijtjens, 2006; Gearhart & Osmundson, 2009; Sickle, Bogan, Kamen, Baird, & Butcher, 2005). Portfolios are intended to provide an individual the opportunity to exhibit samples of efforts and achievements, as well as provide evidence of an individual's reflection on learning and practice (Paulson, Paulson, & Meyer, 1991).

The competency-based electronic portfolio assessment used by the CYCCB allows the candidate to reflect on his or her own practice

Activity A-1

Competency I.B.1.a. Access the professional literature.

Select a professional child and youth care related topic, and seek out relevant professional literature regarding the topic.

Activity A-2

Competency I.B.1.b. Access information about local and national professional activities (e.g., organizations, conferences, and certification).

Select either a practice setting (e.g., 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) or a client population (e.g., adolescent male sexual offenders, runaway and homeless youth, and incarcerated juvenile females), and access information about local and national professional activities (e.g., organizations, conferences, and certification) related to supporting child and youth care practice for this setting or population of clients.

Activity A-3

Competency I.B.1.C. Access information about and discuss current professional issues and future trends and challenges in one's area of special interest.

Choose one child and youth care area of special interest, and write a minimum 500-word essay discussing current professional issues, future trends, and challenges in the special interest area of your choice. Support your opinion by referencing a variety of sources. Include a reference list of sources used. The reference list should include a wide range of sources to demonstrate your ability to access current, relevant information.

and determine how specific competencies are expressed. Each portfolio item is based on a required competency listed in the CYCCB competency document that has not been assessed by another method (i.e., exam or supervisor assessment).

The portfolio activities are divided into seven sections. Some sections have multiple activities from which one may be chosen; others only have one activity. Examples from the first section are:

Discussion

The pilot validation study provided evidence that credentialing child and youth care workers can promote competent care. A national certification program has the potential to increase standards of care throughout the United States. The international collaboration involved in the program's development, pilot testing, and initial administration has helped build a platform for further development of the field and profession. Furthermore, discussions with the varied fields of child and youth work, both community-based and out-of-home care, has created the potential to positively impact the largest group of human service practitioners. If child and youth workers define their professional selves in relation to the child and youth work knowledge and skill base rather than by the setting or population with whom they work, they can become a powerful critical mass of competent professionals, significantly improving the

lives of children, youth, and families. Initial feedback from the pilot study indicates that the certification program is relevant and valid across the varied sites.

Establishing collaborations with others to pursue public policy initiatives to raise standards of practice is essential. Maryland recently became the first state to mandate practitioner certification (in residential care). Assuming that the evolution of the child and youth care field follows the example of other professions, participation by other states typically expands relatively rapidly once one state has stepped forward. The child and youth care field must work together to help bring about policy changes in support of increased standards.

The CYCCB recognizes the importance that advocacy plays in shaping perception and channeling resources. The CYCCB, working through its collaborations with the Advisory Committee and Advisory Network, plans to help create a more integrated system for disseminating information and creating dialogue. It will create opportunities for practitioners and the public to be involved in system change and to work with policymakers to identify solutions and improve services.

Ongoing research and development in the child and youth care workforce area must continue. The CYCCB recently partnered with Kent State University in establishing a research center focusing on the workforce (International Institute for Human Service Workforce Research and Development). Ongoing research must inform necessary developments to the certification program and help the certification effort take a leadership role in understanding and improving the child and youth care workforce. This will include efforts to validate and improve credentialing programs, document practitioner demographics, explore the impact of credentialing, document interest in and access to higher education and training, and identify methods for encouraging young people to pursue careers in child and youth care.

In addition to facilitating workforce research, a closer relationship among the CYCCB and practice settings with higher education can help create career pathways in child and youth work. The competency framework and standards for certification can help provide a structure

for closer collaboration. For example, the Human Development and Family Studies (Youth Development Concentration) at Kent State University recently used the competency framework to review and adapt the curriculum to better align with the field's competencies. In response, the CYCCB created a "provisional certification" status for graduates with child and youth care work-related degrees who pass the certification exam but do not yet meet the experience criteria for full certification, providing an opportunity for graduates to make themselves more marketable to employers.

The pilot study revealed that Canadian examinees had significantly higher scores than U.S. examinees (Thomas, Curry, & Eckles, 2006). Many of these Canadian examinees were graduates from programs specific to child and youth care work. Far fewer programs within the United States provide this specific coursework. These results should prompt an examination of similarities and differences among child and youth work-related degrees in both Canada and the United States.

Just as there are common issues across practice settings (e.g., concerns regarding recruitment and retention, etc.), there is commonality in child and youth work as a field and growing profession across national borders. This is exemplified by the widely accessed website of the International Child and Youth Care Network (www.cyc-net.org) and the Ninth Triennial International Child and Youth Care Conference in Fort Lauderdale, Florida (May 2009). The CYCCB and the International Institute for Human Service Research and Development plans to continue the international collaboration involved in developing the certification program to promote a better international understanding of the commonalities and differences of international child and youth work.

Establishing the CYCCB is an effort by the child and youth care professional community to address crucial workforce issues. It provides the platform and signals the opportunity for practitioners, administrators, legislators, educators, trainers, and child and youth advocates to come together to strengthen the workforce and improve care for children, youth, and families.

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