



Ontario Association of  
**CHILD AND YOUTH CARE**  
Association Ontarienne des Techniques  
**D'ÉDUCATION SPÉCIALISÉE**

## CYC Program Standards Review Pre-Consultation Survey

### Points to Consider for Survey Completion



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| MCCSS Draft Guidelines for Ontario's Quality Standards Framework Discussion Guide - Released September 2019<br>(full document found at <a href="http://www.oacyc.org/news-events">www.oacyc.org/news-events</a> ) | N/A     |

**NOTE: Pre-Consultation Survey deadline has been extended to April 6, 2020**

## CALL TO ACTION CONTEXT

On March 14, 2020, the OACYC sent a request to all members and non-members to consider completing a short Pre-Consultation Survey administered by the Ministry of Colleges and Universities (MCU). It is our understanding that the responses gathered from this Pre-Consultation Survey will be collected and analyzed for consideration of the Vocational Standards Review Process for CYC diploma programs offered at our Ontario post-secondary institutions. As mentioned, the OACYC appreciates that the Ministry of Colleges and Universities values our input and involvement in the consultation process. We also highlighted the possibility that any changes to the Vocational Learning Outcomes (VLOs) or Program Standards have the potential to limit or extend our scope of practice.

Given the influence our responses may have on the future of our field, it is imperative that we join together and collectively engage and respond in meaningful and intentional ways; ways that accurately reflect Child and Youth Care Practice in Ontario.

In order to support the completion of the survey, we have created a number of tips and points for consideration. We believe that if we respond individually, with a collective and consistent message, we can positively leverage this opportunity and potentially ensure the Vocational Learning Outcomes (VLOs) capture the true essence of our unique and distinguished profession and, by extension, improve the outcomes for the young people and families we work alongside.

The information below has been developed from various sources including:

- CYCEAB
- CYCCB
- Code of Ethics
- VLOs/Program Standards
- Scope of Practice
- Psychotherapy Act
- Residential Services Review Panel
- OACYC

**Please feel free to copy and paste any of the material provided in this document for use in your survey response.**

## CURRENT CYCP PROGRAM STANDARDS PREAMBLE

Graduates of the Child and Youth Care program engage with children, youth and their families in their everyday lives, building on their strengths and capacities to promote optimal development and to facilitate positive changes. Many of the children and youth receiving care, and their families, experience complex challenges associated with multiple factors such as, socioeconomic factors, mental health or cognitive issues, developmental challenges and/or are youth involved in the justice system.

Child and youth care practitioners engage and work with children, youth and their families across a wide variety of settings including community-based child and youth development programs, parent education and family support, school-based programs, community mental health, group homes, residential centres, day and residential treatment programs, early intervention, home-based care and treatment, private practice, psychiatric centres, rehabilitation programs, pediatric health care, child protection and youth justice programs.<sup>1</sup>

Child and youth care practitioners work collaboratively with children, youth and their families from child and youth-centred, developmental and *ecological perspectives\** which emphasize and value the interaction between individuals and their physical, cultural and social environments including family, community and social services, as well as the educational and justice systems. Child and youth care practitioners assess and respond to the strengths and needs of children, youth and their families considering their interaction within and between these inter-related systems. Child and youth care practitioners maintain an *anti-oppression perspective\** in their work and demonstrate cultural competence in diverse cultural contexts.

Child and youth care practitioners form relationships with children, youth and families within their *life space\** using in-the-moment, daily life events as opportunities to promote and facilitate positive change. Practitioners plan, implement and evaluate *evidence-based\** and *strength-based\** interventions in the areas of *therapeutic milieu\** and programming, group work and *advocacy\**, with the aim to capture the learning opportunities in the daily life of children, youth and their families. Additionally, practitioners seek out and connect children, youth and their families with relevant, culturally specific and appropriate community resources that support development, *self-advocacy\** and promote *resiliency\**.

As valuable members of the interprofessional team, child and youth care practitioners apply team dynamics, leadership and organizational skills to support the delivery of quality child, youth and family care in a wide variety of settings.

Self is seen as foundational to child and youth care practice. Child and youth care practitioners value self-inquiry as an essential component of professional practice and integrate reflection, self-awareness and self-care strategies into daily practice.

Child and youth care practitioners adhere to professional codes of ethics and all relevant legislation governing child and youth care services. Practitioners are committed to *evidence-based\** research and *evidence-informed practice\** and engage in continuing professional education to support ongoing professional growth and competence in child and youth care practice.

There are opportunities for graduates to pursue further educational qualifications and degree completion. Graduates should contact individual colleges and universities for further details.

Endnote: The Ontario Council on Articulation and Transfer (ONCAT) maintains the [provincial postsecondary credit transfer portal, ONTransfer](#).

**Full version of CYC Program Standards can be located at [www.oacyc.org/news-events](http://www.oacyc.org/news-events)**

## SYNOPSIS OF CURRENT VOCATIONAL LEARNING OUTCOMES

### Child and Youth Care (Ontario Advanced College Diploma)

*The graduate has reliably demonstrated the ability to*

1. develop and maintain relationships with children, youth and their families applying principles of *relational practice\** and respecting their unique *life space\**, cultural and human diversity.
2. assess and respond to the strengths and needs of children and youth, including complex responses impacted by developmental, environmental, physical, emotional, social and mental health challenges in order to promote positive change.
3. analyze and evaluate the impact of the inter-relationship among family, social service, justice and community systems on children, youth and their families and use this information in the planning of holistic care and in the reduction of systemic barriers.
4. plan, implement and evaluate interventions using *evidence- informed practices\** in the areas of *therapeutic milieu\** and programming, and group work to promote *resiliency\** and to enhance development in children, youth and their families.
5. *advocate\** for the rights of children, youth and their families and maintain an *anti-oppression perspective\** and cultural competence in diverse cultural contexts.
6. apply communication, teamwork and organizational skills within the interprofessional team and with community partners to enhance the quality of service in child and youth care practice.
7. develop and implement self-care strategies using self-inquiry and reflection processes to promote self-awareness and to enhance practice as a child and youth care practitioner.
8. use *evidence-based\** research, professional development resources and supervision models to support professional growth and lifelong learning.

*\*See Glossary*

Full version of VLOs can be located at [www.oacyc.org/news-events](http://www.oacyc.org/news-events)

## CODE OF ETHICS

The Standards for Practice were originally adopted by the Association for Child and Youth Care Practice (ACYCP) in 1995. The standards were revised by an ACYCP ad hoc committee in 2016-2017 and adopted by ACYCP June 2017.

### **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 implications 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.

2 Client is defined as the child, family, and former clients.

## **GENERAL INFO AND LANGUAGE ABOUT CHILD & YOUTH CARE**

As adapted from the work of Martha A. Mattingly, Program in Child Development & Child Care, University of Pittsburgh, Pittsburgh, Pa. 15260, USA.

Professional Child and Youth Care Practice focuses on infants, children, and young people, 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, but is not limited to, 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.

## POINTS TO CONSIDER FOR SURVEY QUESTIONS

**Q11: What are the current and emerging trends (e.g. changing demographics, technology, legislation, professional standards etc.) that may impact employment for graduates of CYC (Advanced Diploma Program) programs offered in Ontario?**

### Points to consider:

- CYCs provide universal support (psychoeducation for all), individual and small group support and individual mental health support (treatment goals, progress assessments, treatment)
- Increased focus on Equity and Inclusion within organizations, individual practice and broader systems such as Ministry and governing legislation, specifically within education, child welfare and youth justice
- Increase emphasis on the need for social justice work
- Emerging mental health challenges in our young person populations resulting in increased need for individualized, anti-oppressive, and strength-based, young person/family focused interventions
- Decreased funding to support programs geared to young people and families and increased focus on utilized evidence-based interventions that are documented to be good for all
- Funding/allocated budgets for program delivery do not accurately reflect the time and resources needed to support young people and families while providing a high standard of care
- More emphasis and indisputable need to engage family and community in our work
- Increased awareness and need to further understand the cost/benefits of technology and utilizing tech to provide accessible supports for our digital natives (reference)
- Emerging commitment to produce original research and literature for CYCPs, written by CYCPs, to continue to build evidence to support our unique practice and approaches.
- Increased recognition of the need to have CYCPs in leadership roles and management positions in order to ensure supervision models are reflective of our core competencies.
- Increased awareness that supervisors in milieus supporting children and youth should be CYCs themselves, have specific training in CYC scope of practice and

CYC supervision, and be trained in clinical modalities to assist with CYC specific supervision.

- Recommendations made in the Residential Review Panel report highlighting the need to explore mandatory supervisory training certificates (training from a CYCP lens) for all program supervisors working in CYC milieus, as recommended in the Residential Review Panel report
- Lack of access to professional development opportunities specific to CYC practice.
- Not being members of a regulatory college or governing body
- Due to the lack of minimum qualifications required, approaches and interventions of unqualified workers may not reflect CYC values, principles and practices, resulting in higher levels of workplace burnout and compassion fatigue of CYCPs, impacting the quality of care provided to young people and families
- The impacts of the Psychotherapy Act (as indicated in the OACYC response which can be found here:  
[https://www.oacyc.org/uploads/File/2017-09-20\\_Letter\\_and\\_Input\\_to\\_HPRAC.pdf](https://www.oacyc.org/uploads/File/2017-09-20_Letter_and_Input_to_HPRAC.pdf))
- The increased focus on evidence-based treatment modalities
- The overrepresentation of Black and Indigenous children and youth in residential care and justice systems
- Poor outcomes for youth leaving care
- No minimum qualifications required in some child/family serving milieus (minimum requirements could include post-secondary in CYC and membership with the OACYC to support/promote ethical standards of practice and ongoing professional development)
- Low wages, shift work and loose adherence to the Employee Standards Act (often don't have breaks etc.). Many CYCPs have multiple jobs or precarious employment (relief or contract work)

**Q12: What are current issues or challenges facing this field that may impact the knowledge, skills and abilities required of graduates of CYC (Advanced Diploma) programs offered in Ontario?**

**Points to consider:**

- **See above. In addition, consider the below.**

- Lack of understanding regarding the unique and distinct practice of CYC by decision makers and funding/governance; the part that distinguishes us from other professions is our relational practice, provided in-the-moment and where young people are living their lives (lifespace intervention)

**Q13: What are the growing and/or emerging job opportunities that may impact the future vocational skills and knowledge requirements of graduates of CYC (Advanced Diploma) programs offered in Ontario?**

**Points to consider:**

- Impacts of a lack of regulation narrows the field, and by extension, employment opportunities
- Treatment goes beyond the one hour Counselling appointment per week (during office times) and into life space. This is where children, youth and families need to be supported in the moment to implement the intervention skills and strategies they learn while in a rational/learning state.
- Increase in private practice/consultations; there is a lack of focus on the business aspect of our field; we train to work in collaborative milieus however we do not address the reality of private consultation work and private practice
- Limited opportunities for CYCPs in leadership roles - often management/leaders are not CYCPs, partly due to the minimum education requirements and required membership in a regulatory college
- Provision of effective CYC supervision, facilitated by CYCPs, as indicated by CYC-specific literature

**Q14: Themes that reflect graduates' abilities: Taking into consideration what you have identified as the key external trends, issues, and emerging jobs in the CYC field, you will now be asked to identify the relative importance of twelve (12) broad themes for entry-level graduates of the CYC (Advanced Diploma Program) program.**

**Points to consider:**

- Note what is not there in these broad themes: Relational practice, evidence-based practice, none of the competencies (domains and sub-domains) identified within our practice, advocacy, lifespace, therapeutic practice/milieu etc.

- The skills listed here are basic skills. With an advanced diploma, skills need to be advanced in many or most of these areas. Many of these are first year expectations of a 3 year program. Basic will not prepare practitioners for this specific field of work.

**Q15: Are there any other themes missing, which should be added to the list?**

**Points to consider:**

- The OACYC does not believe the examples provided by the Ministry in the above scaling question reflect the values, practices and principles of effective Child and Youth Care. The themes identified in Q14, could be relevant to any other helping profession. By taking time to answer this question in a well-thought out manner, we have the opportunity to both educate policy analysts and also ensure the Vocational Learning Outcomes include CYC-specific language reflective of the unique nature of our work. Below are a few examples of responses or points to consider. **Please feel free to cut and paste, as you see fit.**
- Treatment goes beyond the one hour counselling appointment per week (during office times) and into life space. This is where children, youth and families need to be supported in the moment to implement the intervention skills and strategies they learn while in a rational/learning state.

**Relational practice (please reference current CYC VLO#1)**

- CYCs intentionally and purposefully utilize interpersonal skills, create individualized care plans, demonstrate genuine care and compassion, utilize strength-based and responsive relational practice to identify and meet the unique needs of young people and families.
- The use of self in practice - relationships are built between people. The practitioner uses aspects of self (experience, knowledge, professional development, own life experiences, personality, etc) to build these relationships including and not limited to personality, interests, experiences, genuineness, etc. CYC Practice looks at the importance of fit (in Applied Behaviour Analysis - ABA, this would be called Pairing) between the Practitioner and the young person/individual.

- Reflective and Reflexive practice - CYCPs think about the interactions through every moment. We are reflective of what is helpful and what may not and also reflect in the moment on the interventions we may use to make every moment a teachable one. CYCPs are intentional and purposeful (to support the individual goals) in their interactions with young people, families and stakeholders.
- Commitment to social innovation to respond to the increasing and unique needs of young people and communities and support the best interest of the public. We are recognized for our creative and innovative approaches to community and young person/family engagement.
- Adherence to ethical practice, as outlined by the OACYC Code of Conduct

### **Therapeutic skills/intervention/milieus**

- The way in which we do therapy (or the way in which our approaches are therapeutic in nature) is unique, in the moment, daily life events, meeting them where they are at, in the lifespace; we respect the lifespace of the child; everything we do is with intention and purpose; all we do is therapeutic; based on what the young person and families require, not a prescribed approach; we recognize our role as supporters in the healing process.
- We create and maintain therapeutic milieus for young people to live, grow and develop while the relationship acts as an agent in healing because of the relational safety and trust. In the context of a relationship of safety, individuals are supported in experiencing opportunities to create, build and develop skills, knowledge and abilities that promote and motivate towards positive, pro-social change (both internal - cognitions, emotions, beliefs - and external -behaviours- for the individual). Relational practice is therapeutic in that it supports a holistic healing process for individuals, families and communities.
- Young-person-Centred and Young-Person Participatory - We empower young people and families by ensuring youth voice and participation is at the centre of all decisions through advocacy efforts, engaging in inquisitive and active listening; utilizing a Child's right perspective, including the young person in meetings and treatment planning; and by working to reduce systemic barriers, thereby improving outcomes.
- CYC Practitioners work collaboratively and are complementary to other professions. CYC Practitioners practice/exist in homes, schools, hospital, treatment centers, group care and justice facilities, and communities on a daily

basis and often for a longer period at a time, and our lifespace work complements the work of social workers, teachers, psychotherapists, to assist in-the-moment, during some of the most challenging times, utilizing a variety of therapeutic skills and modalities threaded into practice.

- Use of individual, group and community outreach modalities and interventions
- Adherence to ethical practice, as outlined by the OACYC Code of Conduct
- Committed to ongoing professional development (CYCCB professionalism)

### **Focus and use of evidence-based practices to assure therapeutic/effective approaches:**

- Utilization of practices that are informed by current CYC literature
- Evaluation of the effectiveness of therapeutic/learning curriculum, skills, interventions- connected to the evidence-based practices.
- CYC approaches are heavily informed by theoretical/ underpinnings and frameworks - ex. anti-oppressive practice/theory, anti-Black racism, attachment theory, neuroscience, trauma-informed care, child development theories, theories used in sociology and psychology, social pedagogy, family-systems theory, ecological perspective, relational-informed ABA practice etc.
- CYC practice is informed by various therapeutic modalities including Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT), narrative therapy, solution-focused therapy, play-therapy, mindfulness practices, crisis management/interventions, group dynamics and development, etc.

**In addition, please consider using language from the CYC Competencies outlined by the Child and Youth Care Certification Board: [www.cyccb.org](http://www.cyccb.org). A snapshot of each of the five Core Competencies can be found below, for your convenience.**

### **Core competencies:**

**Professionalism** - “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”

**Culture & 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.

**Developmental Practice** - Practitioners recognize the critical importance of developmental practice methods focused in child and youth care practice: Genuine Relationships, Health and Safety, Intervention Planning, Environmental Design and Maintenance, Program Planning and Activity Programming and evaluation, 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 lifespan.

**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.

**Relationships & Intervention** - 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.

Full version of Core Competencies can be located at  
<https://www.cyccb.org/competencies>

**Q16: Do you have other information you would like to provide that supports this CYC program standards review?**

**Points to consider:**

- The method of how the program review is scheduled to take place - does not align with the field. The previous review engaged professionals in quadrants of the province which facilitated very rich conversation, collaborative discussion and considerations that would not have been connected to with an online facilitation. It is challenging for people to have and hold space when everyone cannot see and hear one another in a room.
- If anyone has literature that they would like to forward to the OACYC and include in your survey response, please send to [office@oacyc.org](mailto:office@oacyc.org)

**Child and Youth Care Educational Accreditation Board (CYCEAB):**

- It is important for MCU to know that CYC has an educational accreditation board - The Child and Youth Care Educational Accreditation Board (CYCEAB) which is “charged with the accreditation of child and youth care post-secondary programs. CYCEAB accreditation activities document efforts to be accountable to children, youth, and families; to students; and to the profession”. The CYCEAB works to ensure high quality standards for CYC education and ensures “a process for regular, rigorous review of program goals, pedagogies, and outcomes. It facilitates dialogue and education within and across CYC programs about innovation and quality”.
- CYCEAB accreditation is not only for Canadian Institutions, but is promoted world-wide. There are six programs in total that have been accredited to date, four of which are located in Ontario: Cambrian College: Child and Youth Care Advanced Diploma Program; George Brown College: Child and Youth Care Diploma Program; Humber Institute of Technology and Advanced Learning: Honours Bachelor Degree in Child and Youth Care and Sir Sandford Fleming College Child and Youth Care Advanced Diploma Program.

- In order to engage in rigorous program review, it is important to be aware of current Educational Accreditation standards and process and to ensure CYCEAB representation is also included in these consultations.

### Child and Youth Care Certification Board (CYCCB):

- Already established is the personal certification process completed through the Child and Youth Care Certification Board (CYCCB) which “provides an assessment process and certification to child and youth care practitioners who demonstrate their commitment to high standards of care and ongoing competence development. The CYC certification program is the most rigorous demonstration of competence in the field”. The CYCCB promotes and upholds the widely supported ethical standards of practice and unique knowledge and skills competencies of CYC practice.
- The MCU program standards review process requires to uphold the professional competencies already established with the profession of Child and Youth Care and ensure that a review of VLOs is congruent with the foundational knowledge, skills and practices of Child and Youth Care.
- We strongly encourage MCU to contact CYCCB to support the program review consultation process.

### Impacts of the Psychotherapy Act:

- OACYCs response to the Psychotherapy Act:  
[https://www.oacyc.org/uploads/File/2017-09-20\\_Letter\\_and\\_Input\\_to\\_HPRAC.pdf](https://www.oacyc.org/uploads/File/2017-09-20_Letter_and_Input_to_HPRAC.pdf)
- From the above mentioned letter - Our concern is that some of the therapeutic models of care, that CYCPs utilize within mental health and community settings, fall within the recent definition of psychotherapy as a controlled act put forth by the CRPO. This definition, outlined in the document, *Understanding When Psychotherapy is a Controlled Act (2016)*, identifies the controlled act as: “treating by means of psychotherapy techniques delivered through a therapeutic relationship an individual’s serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual’s judgment, insight, behavior, communication or social functioning.”

- As identified throughout this document in multiple places, CYC Practitioners clearly engage in providing therapeutic support, in the context of therapeutic relationships, that address social, emotional needs and utilizes evidence-based best practices for young people and family lifespace.

**NOTE: Pre-Consultation Survey deadline has been extended to April 6, 2020**