

Infant Toddler Mental Health Coalition of Arizona

Competency Guidelines

INFANT MENTAL HEALTH SPECIALIST (LEVEL III)

The Infant Mental Health Specialist *Competency Guidelines* were developed by the Michigan Association for Infant Mental Health (MI-AIMH) and licensed to the Infant Toddler Mental Health Coalition of Arizona (ITMHCA) to clearly describe the areas of expertise, responsibilities, and behaviors that demonstrate competency at this level.

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INFANT MENTAL HEALTH SPECIALIST
Competency Detail

<u>Area of Expertise</u>	<u>As Demonstrated by</u>
<p style="text-align: center;">Theoretical Foundations</p> <p style="text-align: center;"><u>Knowledge Areas</u></p> <p style="text-align: center;"><i>pregnancy & early parenthood</i></p> <p style="text-align: center;"><i>infant/very young child development & behavior</i></p> <p style="text-align: center;"><i>Infant/very young child & family-centered practice</i></p> <p style="text-align: center;"><i>relationship-focused, therapeutic practice</i></p> <p style="text-align: center;"><i>family relationships & dynamics</i></p> <p style="text-align: center;"><i>attachment, separation, trauma & loss</i></p> <p style="text-align: center;"><i>psychotherapeutic & behavioral theories of change</i></p> <p style="text-align: center;"><i>disorders of infancy/early childhood</i></p> <p style="text-align: center;"><i>mental and behavioral disorders in adults</i></p> <p style="text-align: center;"><i>cultural competence</i></p>	<p><i>For infants, very young children, and families referred and enrolled for services:</i></p> <ul style="list-style-type: none"> • Supports and reinforces parent’s capacity to seek appropriate care during pregnancy • Identifies both typical and atypical development during pregnancy, infancy, and early childhood through formal observation, assessment, and in day-to-day interactions with the infant/very young child and family • Provides information, guidance and support to families related to the development and care of infants/very young children to further develop their parenting capabilities and the parent-infant/very young child relationship; <i>ensures that the information is provided in the family’s language</i> • Develops service plans that take into account each infant’s/very young child’s and family’s unique needs, desires, history, lifestyle, concerns, strengths, resources, cultural community, and priorities • During observations and assessments, identifies emerging competencies of the infant and very young child within a relationship context • Supports and reinforces each parent’s strengths, emerging parenting competencies, and positive parent-infant/very young child interactions and relationships • Helps parents to: <ul style="list-style-type: none"> ○ "See" the infant/very young child as a person, as well as all the factors (playing, holding, teaching, etc) that constitute effective parenting of that child ○ Derive pleasure from daily activities with their children • Shares with families realistic expectations for the development of their infants/very young children and strategies that support those expectations • Demonstrates familiarity with conditions that optimize early infant brain development • Recognizes risks and disorders of infancy/early childhood conditions that require treatment, intervention, and/or the assistance of other professionals from health, mental health, education, and child welfare systems • Shares with families an understanding and appreciation of family relationship development • Applies understanding of cultural competence to communicate effectively, establish positive relationships with families, and demonstrate respect for the uniqueness of each client family’s culture • Accurately interprets information from informal and formal observations and assessments to identify capacities and strengths, as well as developmental delays and/or emotional disturbance in infants and very young children served • Accurately interprets information from informal and formal observations and assessments to identify capacities and strengths, as well as relationship disturbances, disorders, and risks in early childhood families • Develops service plans that take into account each infant’s/very young child’s and family’s unique needs, desires, history, lifestyle, concerns, strengths, resources, and priorities • Provides services that reinforce and nurture the caregiver-infant/young child relationship • Engages in parent-infant/young child relationship-based therapies and practices to explore issues (including attachment, separation, trauma, loss) that affect the development and care of the infant/very young child

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<u>Area of Expertise</u>	<u>As Demonstrated by</u>
<p style="text-align: center;">Law, Regulation, & Agency Policy</p> <p style="text-align: center;"><u>Knowledge Areas</u></p> <p style="text-align: center;"><i>ethical practice</i></p> <p style="text-align: center;"><i>government, law, & regulation</i></p> <p style="text-align: center;"><i>agency policy</i></p>	<ul style="list-style-type: none"> • Exchanges complete and unbiased information in a supportive manner with families and other team members • Practices confidentiality of each family’s information in all contexts with exception only when making necessary reports to protect the safety of a family member (eg, Children’s Protective Services, Duty to Warn) • Maintains appropriate personal boundaries with infants/very young children and families served, as established by the employing agency • Promptly and appropriately reports harm or threatened harm to a child’s health or welfare to Children’s Protective Services • Accurately and clearly explains the provisions and requirements of federal, state, and local laws affecting infants/young children and families (eg, Part C of IDEA, child protection, child care licensing rules and regulations) to families, child or foster care staff, community-based programs • Shares information with non-citizen families and service agencies about the rights of citizen children of non-citizen parents • Personally works within the requirements of: <ul style="list-style-type: none"> ○ Federal and state law ○ Agency policies and practices ○ Professional code of conduct
<p style="text-align: center;">Systems Expertise</p> <p style="text-align: center;"><u>Knowledge Areas</u></p> <p style="text-align: center;"><i>service delivery systems</i></p> <p style="text-align: center;"><i>community resources</i></p>	<ul style="list-style-type: none"> • Assists families to anticipate, obtain, and advocate for concrete needs and other services from public agencies and community resources • Actively seeks resources to address child and family needs • Works collaboratively with and makes referrals to other service agencies to ensure that the child(ren) and family receives services for which they are eligible and that the services are coordinated • Helps parents build the skills they need to access social support from extended family, neighbors, and friends needed and as available in the community • Makes families and service providers/agencies aware of community resources available to families

INFANT MENTAL HEALTH SPECIALIST
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Area of Expertise

As Demonstrated by

<u>Area of Expertise</u>	<u>As Demonstrated by</u>
<p>Direct Service Skills</p> <p style="text-align: center;"><u>Knowledge Areas</u></p> <p><i>observation & listening</i></p> <p><i>screening & assessment</i></p> <p><i>responding with empathy</i></p> <p><i>intervention/treatment planning</i></p> <p><i>developmental guidance</i></p> <p><i>supportive counseling</i></p> <p><i>parent-infant/very young child relationship-based therapies & practices</i></p> <p><i>advocacy</i></p> <p><i>life skills</i></p> <p><i>safety</i></p>	<p><i>For infants, young children, and families referred and enrolled for services:</i></p> <ul style="list-style-type: none"> • Establishes trusting relationship that supports the parent(s) and infant/very young child in their relationship with each other and that facilitates change • Works with the parent(s) and the infant/very young child together, often in the home, in accordance with accepted practice • Observes the parent(s) or caregiver(s) and infant/very young child together to understand the nature of their relationship, developmental strengths, and capacities for change • Conducts observations, discussions, and formal and informal assessments of infant/very young child development, in accordance with established practice • Observes and articulates the infant's and parent's perspectives within a relationship context • Recognizes and holds multiple viewpoints, eg, the infant, the parent, the service provider • Interprets and synthesizes information (including family perceptions and priorities) from observations, discussions, and formal and informal assessments to: <ul style="list-style-type: none"> ○ Identify and feed back to the parent(s) or caregiver(s) the strengths, capacities, needs, and progress of the infant/very young child and family/caregiver(s) ○ Develop mutually agreed upon service plans incorporating explicit objectives and goals ○ Formulate clinical recommendations that guide best practice • Effectively implements relationship-focused, therapeutic parent-infant/young child interventions that enhance the capacities of parents and infants/very young children • Helps parents identify goals and activities that encourage interaction and that can be woven into the infant's/very young child's and family's daily routines • Uses multiple strategies to help parents or caregivers: <ul style="list-style-type: none"> ○ Understand their role in the social and emotional development of infants/very young children ○ Understand what they can do to promote health, language, and cognitive development in infancy and early childhood ○ Find pleasure in caring for their infants/very young children • Promotes parental competence in: <ul style="list-style-type: none"> ○ Facing challenges ○ Resolving crises and reducing the likelihood of future crises ○ Solving problems of basic needs and familial conflict • Uses toys, books, media, etc, as appropriate to support developmental guidance • Identifies/diagnoses disturbances or disorders of infancy and mental illness in family members, as appropriate, using available diagnostic tools (eg, <i>Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)</i>, <i>Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC-0 to 3R)</i>) • Attends and responds to parental histories of loss as they affect the care of the infant/very young child, the parent's development, the emotional health of the infant/young child, and the developing relationship • Recognizes environmental and caregiving threats to the health and safety of the infant/very young child and parents, and takes appropriate action

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<u>Area of Expertise</u>	<u>As Demonstrated by</u>
<p style="text-align: center;">Working With Others</p> <p style="text-align: center;"><u>Skill Areas</u></p> <p style="text-align: center;"><i>building & maintaining relationships</i></p> <p style="text-align: center;"><i>supporting others/mentoring</i></p> <p style="text-align: center;"><i>collaborating</i></p> <p style="text-align: center;"><i>resolving conflict</i></p> <p style="text-align: center;"><i>empathy & compassion</i></p> <p style="text-align: center;"><i>consulting</i></p>	<ul style="list-style-type: none"> • Builds and maintains effective interpersonal relationships with families and professional colleagues by: <ul style="list-style-type: none"> ○ Respecting and promoting the decision-making authority of families ○ Understanding and respecting the beliefs and practices of the family's culture ○ Following the parents' lead ○ Following through consistently on commitments and promises ○ Providing regular communications and updates • Works with and responds to families and colleagues in a tactful and understanding manner • Provides positive, specific feedback to encourage and reinforce desired behaviors and interactions in families • Encourages parents to share with other parents (eg, through nurturing programs, parent-child interaction groups) • Provides emotional support to parents/caregivers and children when sad, distressed, etc • Assists families to develop the skills they need to become their own advocates • Models appropriate behavior and interventions for new staff as they observe home visits • Collaborates and shares information with staff of child care, foster care, community-based programs, and other service agencies to ensure effective, coordinated services • Works constructively to find “win-win” solutions to conflicts with colleagues (eg, interagency, peer-peer, and/or supervisor-supervisee conflicts) • Training/coaching of caregivers and/or other professionals (eg childcare teacher, foster parent, health, mental health, legal)
<p style="text-align: center;">Communicating</p> <p style="text-align: center;"><u>Skill Areas</u></p> <p style="text-align: center;"><i>listening</i></p> <p style="text-align: center;"><i>speaking</i></p> <p style="text-align: center;"><i>writing</i></p>	<ul style="list-style-type: none"> • Actively listens to others; asks questions for clarification • Uses appropriate non-verbal behavior and correctly interprets others' non-verbal behavior • Communicates honestly, sensitively, and empathetically with families, using non-technical language • Obtains translation services as necessary to ensure effective communication with families who may experience a communication barrier • Writes clearly, concisely, and with the appropriate style (business, conversational, etc) in creating notes, reports, and correspondence

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Area of Expertise

As Demonstrated by

<p style="text-align: center;">Thinking</p> <p style="text-align: center;"><u>Skill Areas</u></p> <p style="text-align: center;"><i>analyzing information</i></p> <p style="text-align: center;"><i>solving problems</i></p> <p style="text-align: center;"><i>exercising sound judgment</i></p> <p style="text-align: center;"><i>maintaining perspective</i></p> <p style="text-align: center;"><i>planning & organizing</i></p>	<ul style="list-style-type: none"> • Sees and can explain the “big picture” when analyzing situations • Sees and can explain the interactions of multiple factors & perspectives • Assigns priorities to needs, goals, and actions • Considers difficult situations carefully • Evaluates alternatives prior to making decisions • Integrates all available information and consults with others when making important decisions • Generates new insights and workable solutions to issues related to effective relationship-focused, family-centered care • Defines, creates a sequence for, and prioritizes tasks necessary to perform role and meet the needs of families • Employs effective systems for tracking individual progress, ensuring follow up, and monitoring the effectiveness of service delivery as a whole
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<p style="text-align: center;">Reflection</p> <p style="text-align: center;"><u>Skill Areas</u></p> <p style="text-align: center;"><i>contemplation</i></p> <p style="text-align: center;"><i>self awareness</i></p> <p style="text-align: center;"><i>curiosity</i></p> <p style="text-align: center;"><i>professional/personal development</i></p> <p style="text-align: center;"><i>emotional response</i></p> <p style="text-align: center;"><i>parallel process</i></p>	<ul style="list-style-type: none"> • Regularly examines own thoughts, feelings, strengths, and growth areas; discusses issues, concerns, actions to take with supervisor, consultants, or peers • Consults regularly with supervisor, consultants, peers to understand own capacities and needs, as well as the capacities and needs of families • Seeks a high degree of agreement between self-perceptions and the way others perceive him/her • Remains open and curious • Identifies and participates in learning activities related to the promotion of infant mental health • Keeps up-to-date on current and future trends in infant and very young child development and relationship-focused practice • Uses reflective practice throughout work with infants/very young children and families to understand own emotional response to infant/family work and recognize areas for professional and/or personal development • Recognizes and responds appropriately to parallel process
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INFANT MENTAL HEALTH SPECIALIST Endorsement Requirements

Requirements

Education	<p>Master of Arts (MA), Master of Science (MS), Master of Education (MEd), Master of Applied Studies (MAS), Doctorate in Education (EdD), Master of Social Work (MSW), Master of Nursing (MSN), Doctor of Psychology (PsyD), Doctor of Philosophy (PhD), Medical Doctor (MD), Doctor of Osteopathy (DO) or other degree specific to one's professional focus in infant mental health; university certificate program, and/or course work in areas such as infant/very young child development, family-centered practice, cultural sensitivity, family relationships and dynamics, assessment, and intervention, in accordance with MI-AIMH Training Guidelines and Endorsement Competencies. Official transcript(s) required.</p> <p>Applicants may ask to use intensive in-service training to fulfill some of the recommended coursework.</p>
Training	<p>Minimum 30 clock hours of relationship-based education and training pertaining to the promotion of social-emotional development and/or the practice of infant mental health. Applicants will include as many hours as necessary to document that competencies (as specified in <i>Competency Guidelines</i>) have been met.</p>
Specialized Work Experience	<p>Two years, postgraduate, supervised work experiences providing culturally sensitive, relationship-focused, infant mental health services. This specialized work experience must be with both the infant/very young child and his/her biological, foster, or adoptive parent¹ on behalf of the parent-infant relationship. Infant mental health services will include concrete assistance, advocacy, emotional support, developmental guidance, early relationship assessment, and parent-infant/very young child relationship-based therapies and practices. These therapies and practices may include but are not limited to parent-infant psychotherapy, interaction guidance, and child-parent psychotherapy and are intended to explore issues related to attachment, separation, trauma, and unresolved losses as they affect the development, behavior, and care of the infant/very young child.</p> <p>OR</p> <p>One year supervised graduate internship with direct service experience in providing culturally sensitive, relationship-based, infant mental health services and one year, postgraduate, supervised work experience as described above.</p>
Reflective Supervision/Consultation	<p>Relationship-focused, reflective supervision/consultation with an approved supervisor/consultant, individually or in a group, while providing services to infants, very young children, and families. Minimum: 50 clock hours within a one- to two-year timeframe.</p>
Professional Reference Ratings	<p>Total of three ratings:</p> <ol style="list-style-type: none"> 1. One from current program supervisor, teacher, trainer, or consultant, and 2. One from person providing reflective supervision/consultation, and 3. One from another supervisor, teacher, trainer, or consultant; colleague; or supervisee (if candidate is a supervisor). <p><i>Please note: At least one rating must come from someone endorsed, or qualified to be endorsed, at Level II, III, or IV.</i></p>

¹ Infant mental health services that meet Level III specialized work criteria are provided by professionals whose role includes intervention or treatment of the infant/toddler's primary caregiving relationship, (ie, biological, foster, or adoptive parent); these experiences are critical to the development of a specialization in infant mental health. Infant Family Specialist, Level II is broader and includes practitioners whose work experiences come solely from programs that provide education/support/consultation to infant and early childhood care providers or whose intent is primarily to educate parents.

INFANT MENTAL HEALTH SPECIALIST
Endorsement Requirements
 continued

Requirements, continued

Code of Ethics Statement & Endorsement Agreement	Signed
Documentation of Competencies:	1. Professional portfolio will document that competencies have been adequately met through course work, in-service training, and reflective supervision/consultation experiences. 2. Successful completion of the ITMHCA written examination.
Professional Membership:	Membership in ITMHCA or another infant mental health association.

Continuing Endorsement Requirements

Education and Training	Minimum of 15 clock hours per year of relationship-based education and training, pertaining to the promotion of social-emotional development and/or the practice of infant mental health (eg, regional training, related course work at colleges or universities, infant mental health conference attendance). For those who earn endorsement at Level III and provide reflective supervision or consultation to others, at least three of the hours of specialized training must be about reflective supervision or consultation.
Professional Membership	Annual renewal of membership in ITMHCA or another infant mental health association.

Continuing Endorsement Recommendations

Reflective Supervision	ITMHCA recommends that all Endorsed professionals seek reflective supervision or consultation. It is especially recommended that Endorsed professionals who provide reflective supervision or consultation participate in reflective experiences, individual or group, while providing reflective supervision or consultation to others.
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