



INFANT-TODDLER MENTAL HEALTH COALITION OF ARIZONA

Infant Mental Health Endorsement *Celebrating Quality Connections with Families*

The Portfolio

Once the candidate has been assigned an Advisor, and has downloaded the e-Portfolio form (password protected and available after the Application step), the next steps are to document all the ways in which the Competencies have been gained. It is important to talk with your Advisor to make sure you are applying at the most appropriate level. Then use the e-Portfolio form to continue to communicate with your Advisor about any questions regarding what “counts” and where to put training vs. education vs. work, etc.

Preparation of a Portfolio

The candidate identifies which competencies and applicable knowledge areas within each competency to document as appropriate to the endorsement level all in-service training experiences, reflective supervision/consultation experiences (Levels 2, 3, and 4), and paid work experiences. Professional reference ratings, completed by 3 people chosen by the candidate provide third party validation of competencies. These materials reflect the candidate's capabilities within the infant and family field as identified for each level of endorsement in the guidelines. Each candidate also agrees to the ITMHCA Code of Ethics and Agreement by signing the appropriate forms. The completed portfolio is submitted hard copy in a large envelope at least 6 weeks prior to the next exam date for candidates for Levels III or IV. Portfolios may be submitted at any time for Levels I and II.

I. All Levels

Included in the Portfolio are:

- a. The portfolio itself printed in hard copy.
- b. Official transcript(s) from all educational institutions attended documenting education, coursework taken, degree(s) and/or certificate(s) earned from all undergraduate and graduate work. Official transcripts should remain unopened in the envelope from the college or university. Transcripts from high school do not need to be submitted, except at Level 1. A typed list of the applicant's educational experiences is included under Education. As an example:

Tempe High School, 1985; Diploma
Mesa Community College, 1989, Early Childhood Education, Infant Development and Behavior, 3 credits
ASU, 1994, B.A. Education
ASU, 1997, Master of Social Work,
ASU, 2008, Master of Advanced Study in Infant Family Practice

Each Level 1 applicant must submit a copy of high school diploma or General Equivalency Diploma (GED). This is not required for Levels 2, 3, or 4.

- c. Paid work experience(s) with/related to infants, toddlers, caregivers, families: Provide program name and agency, program address, brief description of key service responsibilities, years of service with program, and immediate program supervisor and/or infant mental health consultant, *e.g.*,



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Place of Work: Scottsdale United Methodist Church Daycare

Job Title: Infant Room Teacher

Brief Description of Job: Provide attentive and nurturing care of infants. Engage in activities to promote infants' ongoing development. Create training activities to expand staff's knowledge of child development.

Dates/years employed: Mar 9, 2009 to present, Georgia Day

Place of Work: Southwest Human Development

Job Title: Healthy Families: Family Assessment Working (FAW)

Brief Description of Job: Conduct culturally sensitive screening and comprehensive interviews with new or expecting parents about their life experience, stresses; and parenting knowledge and expectations. Provide immediately needed resources for families. Complete parent enrollment packet for the Family Support Specialist team.

Dates/years employed: Jan 31, 2005 to Feb 27, 2009/ 4 yrs., Sandy Milward, MSW

- d. If appropriate, list specialized internship training/placement in culturally sensitive, relationship-based practice promoting infant mental health:

Program Name: Master of Advanced Studies in Infant-Family Practice

College/University: Arizona State University

Internship Placement: Child Development Laboratory, ASU

Dates: 1/2009-5/2009

- e. If appropriate, list Graduate Certificate Program completed in Infant Mental Health. Match the competency/knowledge area gained from each course. As a general guideline, no more than 1 Competency/Knowledge Area can be covered for each clock hour of the course. Provide the title of the course, instructor, date(s), number of clock hours or time frame, and Competency Area(s) and Knowledge area(s) within the Competency, *e.g.*,

Program name: Master of Advanced Studies in Infant-Family Practice

College/University: Arizona State University

Date of Completion: July 27, 2009

Coursework:

CDE 570- Child Development for Infant-Family Practice, Robert Weigand, 48 hours,
August 2008-December 2008

Theoretical Foundations: *pregnancy & early parenthood, infant & young child development & behavior, attachment, separation, & loss, disorders of infancy/early childhood*



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Direct Service Skills: *observation & listening, screening & assessment, developmental guidance*

Communicating: *listening, speaking, writing*

Thinking: *analyzing information, solving problems, exercising sound judgment, maintaining perspective, planning & organizing*

Reflection: *contemplation, self-awareness, curiosity, professional/personal development*

- f. List specialized in-service training experiences and conference attendance relevant to culturally sensitive, relationship-based practice promoting infant mental health. Match the competency/knowledge area gained at each training experience. As a general guideline, no more than 1 Competency/Knowledge Area can be covered for each hour of the training session. Provide the title of the training, name of trainer, date(s), number of hours or time frame, sponsoring group, and Competency Area and Knowledge area within the Competency, *e.g.*,

Title of training/workshop: Creating Partnerships with Vulnerable Families

Name of trainer/presenter: Janet Dean

Location of training/workshop: Tucson, AZ

Sponsor of training: SWHD

Date(s): Oct 16, 2008

hours: 1.5 hrs

Competency(ies) addressed (see Competency Guidelines):

Theoretical Foundations

- Cultural competence

Systems Expertise

- Service delivery system
- Community resources

- g. List specialized conference(s) that you have attended specific to the social and emotional development of infants, toddlers and their families and culturally sensitive, relationship-based practice promoting infant mental health (Note: Conferences enrich our understanding. Please list all that have been important to your growth in the field. However, only 1 conference may be included in the 30 required in-service hours.) As an example, list the:

Title of conference attended: ITMHCA Risk to Resilience

Sponsor of conference: ITMHCA

Location of conference: Desert Willow, Phoenix, Arizona

Date(s): September 18-19, 2008

List individual workshops attended at the conference:



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Title of individual workshop: Supporting Emotional Regulation in Group Care with
Children Exposed to Violence

Name of trainer/presenter: Genett Tomko

hours: 1.75

Competency(ies) addressed (see Competency Guidelines): Working with Others,
Thinking

h. Three professional reference ratings:

Complete ITMHCA Endorsement reference forms by a current teacher, CDA mentor, instructor, supervisor, consultant, and/or colleague familiar with your work with infants, toddlers, parents, other caregivers, and families, as specified at each level. Ratings should remain in sealed envelope with signature of the rater across the seal.

i. A signed ITMHCA Code of Ethics

j. A signed Applicant Agreement .

k. Scholarship Form, if applying for scholarship assistance to cover the Endorsement fee.

l. ITMHCA membership form and dues, if not already a member of ITMHCA or the Infant Mental Health Association/Coalition in another League state.

II. Levels 2, 3 and 4 ONLY

a. List **reflective supervision/consultation** experiences received specific to culturally sensitive, relationship-based practice promoting infant mental health:

Name of Supervisor/Consultant: Doug Albrecht, Alison Steier

Agency or Office where Supervision/Consultation took place: SWHD

Frequency of Meetings: Weekly for one hour

Years/Dates: April 2009 to October 2009

Total # Hours: 17.75

Individual Supervision: 14.25

Group Supervision: 3.5

Briefly describe the nature of the supervised/consultation received.



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III. Levels 3 & 4

- a. List **provision of reflective supervision/consultation** to individual(s) or agency(s) in infant and family field:

Name of Individual/Agency:

Brief description of responsibilities:

Frequency of Meetings:

Years/Dates:

Total # Hours:

- b. List relevant training(s) and workshops **provided to practitioners** working with infants, toddlers, caregivers and families:

Title:

Location:

Training sponsor:

Training date(s):

- c. List **college class(es)** taught:

Title of college class:

College/university:

Brief description of class:

Year(s) offered:

- d. List **Publications** (full reference):

- e. List **Research projects**, including brief description:

- f. List **Policy responsibilities**, including brief description of role: