



New Mexico Association for Infant Mental Health

Competency Guidelines

LEVEL 3, INFANT MENTAL HEALTH SPECIALIST

INTRODUCTION

The Level 3 Competency Guidelines have been adopted by the New Mexico Association for Infant Mental Health to clearly describe the areas of expertise, responsibilities, and behaviors that demonstrate competency at this level. Level 3 practitioners have earned a minimum of a Master's degree, may possess a Doctoral degree, and meet the competencies defined in the Competency Detail for Level 3. Examples of practitioners who may perform the specialized work as described in the Level 3 work requirement section and for whom Level 3 competencies may be appropriate include but are not limited to Developmental Specialist III, clinical nurse practitioner, and mental health clinician.

Each professional who works with families, infants and toddlers deserves and requires supervision and/or consultation that enhances his/her ability to be self aware, and to examine his/her professional and personal thoughts and feelings in response to work within the infant and family field. Level 3 practitioners will receive a minimum of 25





hours of reflective supervision and/or consultation per year provided by a Level 3 or Level 4 professional or 50 clock hours in a two-year time frame.

**NMAIMH ENDORSEMENT REQUIREMENTS
INFANT MENTAL HEALTH SPECIALIST
LEVEL 3**

Requirements: Preparation of a Portfolio	
Education:	<p>Master of Arts (MA), Master of Science (MS), Master of Education (MEd), 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 and toddler development, family-centered practice, cultural sensitivity, family relationships and dynamics, assessment and intervention, in accordance with NMAIMH 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 Competency Guidelines) have been met.</p>
Specialized Work Experience:	<p>2 years, post-graduate, supervised work experiences providing culturally sensitive, relationship-focused, infant mental health services¹. This specialized work experience must be with both the infant/toddler and primary caregiver² on behalf of the parent-infant relationship. Primary responsibilities will include intervention or treatment with a) families and their infants, toddlers and very young children because of parental factors which place the infant at risk for impaired cognitive and/or psychosocial development, b) distressed infants and toddlers and their families, c) high risk families whose pattern of living from crisis to crisis and/or pre-existing conflicts severely limit their ability to adequately care for their infant, and/or d) families who are ill-prepared to meet the special needs of their infants.</p> <p>OR</p> <p>1 year supervised graduate internship with direct service experience in providing culturally sensitive, relationship-based, infant mental health services and 1 year, post-graduate, supervised work experience as described above.</p>
Reflective	<p>Relationship-focused, reflective supervision/as described in the NMAIMH document <i>Reflective</i></p>

¹ Infant mental health services will include concrete assistance, advocacy, emotional support, developmental guidance, early relationship assessment, and parent-infant psychotherapies (those considered best practice and/or evidence-based), within the limits of the individual’s professional scope of practice.

² 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, (i.e., 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 & early childhood care providers or whose intent is primarily to educate parents.





Requirements: Preparation of a Portfolio	
Supervision/Consultation:	<i>Supervision and Consultation Defined</i> , individually or in a group, while providing services to infants, toddlers, and families. Minimum: 50 clock hours within a two-year time frame (maximum).
Professional Reference Ratings:	Total of three professional reference ratings from: <ol style="list-style-type: none">1. One rating from current program supervisor, teacher, trainer or consultant2. One rating from person providing reflective supervision/consultation3. Third rating may be from another supervisor, teacher, trainer or consultant; colleague; or supervisee (if candidate is a supervisor).
Code of Ethics Statement, Agreement, Candidate's Waiver:	Signed
Documentation of Competencies:	<ol style="list-style-type: none">1. Successful completion of two-level review of contents of portfolio2. Successful completion of the NMAIMH written examination.
Professional Membership:	Membership in NMAIMH or another infant mental health association
Continuing Endorsement Requirements:	
	15 clock hours of relationship-based education and training pertaining to the social and emotional development of infants, toddlers and families Annual renewal of membership in NMAIMH or another Infant mental health association NMAIMH recommends that all endorsed professionals continue to receive regular reflective supervision/consultation.



COMPETENCY DETAIL

Area of Expertise As Demonstrated By

Theoretical Foundations

Knowledge Areas
pregnancy & early parenthood infant & young child development & behavior Infant/young child & family-centered practice relationship-based, therapeutic practice family relationships & dynamics attachment, separation, trauma & loss psychotherapeutic & behavioral theories of change disorders of infancy/early childhood mental and behavioral disorders in adults cultural competence

For infants, young children, and families referred and enrolled for services:

- 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/young child and family
- Provides information, guidance and support to families related to the development and care of infants/young children to further develop their parenting capabilities and the parent-infant/young child relationship; ensures that the information is provided in the family's language
- Develops service plans that take into account each infant's/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 young child within a relationship context
- Supports and reinforces each parent's strengths, emerging parenting competencies, and positive parent-infant/young child interactions and relationships
- Helps parents to:
 - "See" the infant/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/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 which require treatment 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 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/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 psychotherapy to explore issues (including attachment, separation, trauma & loss) that affect the development and care of the infant/young child.



COMPETENCY DETAIL

Area of Expertise

Law, Regulation & Agency Policy

Knowledge Areas

*ethical practice
government, law & regulation
agency policy*

As Demonstrated By

- 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 (e.g., Children's Protective Services, Duty to Warn, etc.)
- Maintains appropriate personal boundaries with infants/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 Protective Services
- Accurately and clearly explains the provisions and requirements of federal, state and local laws affecting infants/young children and families (e.g., 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:
 - Federal and state law
 - Agency policies and practices
 - Professional code of conduct

Systems Expertise

Knowledge Areas

*service delivery systems
community resources*

- Assists families to anticipate, obtain, and advocate for concrete needs & 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



COMPETENCY DETAIL

Area of Expertise

Direct Service Skills

Knowledge Areas

*observation & listening
screening & assessment
responding with empathy
treatment planning
developmental guidance
supportive counseling
parent-infant/toddler
psychotherapy
advocacy
life skills
safety*

As Demonstrated By

For infants, young children, and families referred and enrolled for services:

- Establishes trusting relationship that supports the parent(s) and infant/young child in their relationship with each other and facilitates change
- Works with the parent(s) and the infant/young child together, often in the home, in accordance with accepted practice
- Observes the parent(s) or caregiver(s) and infant/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/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, *e.g.*, 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:
 - Identify and feed back to the parent(s) or caregiver(s) the strengths, capacities, needs, and progress of the infant/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-based, therapeutic parent-infant/young child interventions that enhance the capacities of parents and infants/young children
- Helps parents identify goals and activities that encourage interaction and that can be woven into the infant's/young child's and family's daily routines
- Uses multiple strategies to help parents or caregivers:
 - Understand their role in the social and emotional development of infants/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/young children
- Promotes parental competence in:
 - 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
- Diagnoses disturbances or disorders of infancy and mental illness in family members, as appropriate, using available diagnostic tools (*e.g.*, Diagnostic Manual – 4 (DSM4) , Diagnostic Classification (DC-0 to 3R)
- Attends and responds to parental histories of loss as they affect the care of the infant/young child, the parent's development, the emotional health of the infant/young child, and the developing relationship
- Recognizes environmental and care giving threats to the health and safety of the infant/young child and parents, and takes appropriate action
- Secures literature/brochures in families' language(s)



COMPETENCY DETAIL

Area of Expertise As Demonstrated By

Working with Others

Skill Areas

building & maintaining relationships
supporting others/mentoring
collaborating
resolving conflict
empathy & compassion

- Builds and maintains effective interpersonal relationships with families and professional colleagues by:
 - 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 & 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 (e.g., through nurturing programs, parent-child interaction groups, etc.)
- 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 (e.g., interagency, peer-peer, and/or supervisor-supervisee conflicts)

Communicating

Skill Areas

listening
speaking
writing

- 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 do not speak English
- Writes clearly, concisely, and with the appropriate style (business, conversational, etc.) in creating notes, reports and correspondence





COMPETENCY DETAIL

Area of Expertise As Demonstrated By

Thinking

Skill Areas

analyzing information
solving problems
exercising sound judgment
maintaining perspective
planning & organizing

- Sees and can explain the “big picture” when analyzing situations
- Sees and can explain the interactions of various factors
- 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-based, 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, for assuring follow up, and for monitoring the effectiveness of service delivery as a whole

Reflection

Skill Areas

contemplation
self awareness
curiosity
professional/personal development
emotional response
parallel process

- 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 child development and relationship-based practice
- Uses reflective practice throughout work with infants/young children and families to understand own emotional response to infant/family work and to recognize areas for professional and/or personal development

