



GLOSSARY

Administrative Supervision: The oversight of federal, state, and agency regulations, program policies, rules, and procedures. Supervision that is primarily administrative will be driven to achieve the following objectives: hire, train/educate, oversee paperwork, write reports, explain rules and policies, coordinate, monitor productivity, and evaluate. (From *Best Practice Guidelines for Reflective Supervision/Consultation* at <http://www.mi-aimh.org/reflective-supervision>)

Applicant: A professional/service provider who has applied for the NMAIMH Endorsement[®] as: an Infant Family Associate (Levels 1), or an Infant Family Specialist (Level 2), or an Infant Mental Health Specialist (Level 3), or and Infant Mental Health Mentor (Level 4).

Applicant's Waiver: An agreement signed by an endorsement applicant waiving the right to review professional reference forms. The waiver is included on page one of each reference rating form

Attachment: An emotional bond between a parent/primary caregiver and infant that develops over time and as a result of positive care-seeking behaviors (e.g., crying, smiling, vocalizing, grasping, reaching, calling, following) and responsive caregiving (e.g., smiling, talking, holding, comforting, caressing)

Children's Protective Services (CPS): CPS is within the Protective Services Division of the Children Youth and Families Department. PSD is the state agency designated to administer Child Welfare Services in New Mexico. The PSD is mandated, in accordance with the New Mexico Children's Code, Section 32A-4 et. seq., NMSA 1997, to receive and investigate reports of children in need of protection from abuse and/or neglect by their parent, guardian or custodian, and to take action to protect those children whose safety cannot be assured in the home. PSD is committed to providing for the well-being of the children in its care and to securing permanency for those children as quickly and as safely possible.

Clinical Supervision/Consultation: Supervision or consultation that is case-focused, but does not necessarily consider what the practitioner brings to the intervention nor does it necessarily encourage the exploration of emotion as it relates to work with an infant/very young child and family. Supervision or consultation that is primarily clinical will most likely include many or all of the administrative objectives as well as review casework, discuss the diagnostic impressions and diagnosis, discuss intervention strategies related to the intervention, review the intervention or treatment plan, review and evaluate clinical progress, give guidance/advice, and teach. (From *Best Practice Guidelines for Reflective Supervision/Consultation* at <http://www.mi-aimh.org/reflective-supervision>)

Collaborate: To work willingly with other direct-service providers, parents, community agencies, faculty, and other professionals to obtain, coordinate, and research services that effectively nurture infants and families

Competency Guidelines: A description of specific areas of expertise, responsibilities and behaviors that are required to earn the NMAIMH Endorsement[®] as an Infant Family Associate (Level 1), Infant Family Specialist (Level I2), Infant Mental Health Specialist (Level 3), and Infant Mental Health Mentor (Level 4). The areas of expertise, very generally described here, include theoretical foundations; law, regulation, and policy; service systems; direct-service skills; working with others; communicating; reflection; and thinking



Consultant: In most instances, this term refers to a provider of reflective supervision/consultation (RS/C). The RS/C may be provided to groups of practitioners or individuals. Consultant often refers to a provider of RS/C who is hired contractually from outside an agency or organization; i.e., separate from a program supervisor who is typically employed by the agency

Cultural Competence: The ability to observe, understand, and respond, appreciating individual capacities and needs of infants, very young children, and families, with respect for their culture, including race, ethnicity, values, behaviors, and traditions

Cultural Sensitivity: The ability to respect and acknowledge differences in beliefs, attitudes, and traditions related to the care and raising of young children, remaining open to different points of view and approaching families with respect for their cultural values

Endorsement Portfolio form: The document that endorsement applicants use as a template for the lists of specialized education, work, in-service training, and reflective supervision experiences related to the requirements and competencies for endorsement. The Endorsement Portfolio form is a required part of the professional portfolio.

Early Childhood: A timeframe from birth to five years, including infancy, toddlerhood, and early childhood

Early Childhood Professional: A professional/service provider who works with infants and very young children (birth to five years). Examples include a child care provider, an Early Head Start teacher, a family support specialist, a home visitor, a maternal support specialist, and an infant mental health specialist

Early Intervention: Early intervention typically refers to a system of coordinated services that promotes a very young child's growth and development and supports families during the critical early years. Early intervention services to eligible infants, very young children, and families are federally mandated through the Individuals with Disabilities Education Act (Part B and/or Part C). Early intervention services delivered within the context of the family are intended to:

- Improve both developmental, social, and educational gains
- Reduce the future costs of special education, rehabilitation, and health care needs
- Reduce feelings of isolation, stress, and frustration that families may experience
- Help alleviate and reduce behaviors by using positive behavior strategies and interventions
- Help children with disabilities grow up to become productive, independent individuals

EASy (Endorsement Application System): A secure, Web-based software designed to accept preliminary applications and professional portfolios electronically; facilitate communication between and among applicant, Endorsement Coordinator, Endorsement Advisor, and portfolio reviewers; and coordinate portfolio reviews

Endorsement: The NMAIMH Endorsement for Culturally Sensitive, Relationship-focused Practice Promoting Infant Mental Health (IMH-E[®]) is intended to recognize experiences that lead to competency in the infant-family field. It does not replace licensure, certification, or credentialing, but instead is meant as an "overlay" to these. The NMAIMH Endorsement[®] is multidisciplinary including professionals from psychology, education, social work, psychiatry, child and/or human development, nursing, and others. Endorsement indicates an individual's efforts to specialize in the promotion/practice of infant mental health within his/her own chosen professional discipline

Those who have earned endorsement have demonstrated that the individual has received a minimum of specialized education, work, in-service training, and reflective



supervision/consultation experiences that have led to competency in the promotion and/or practice of infant mental health. Endorsement does not guarantee the ability to practice as a mental health professional, although many have earned endorsement as licensed mental health professionals

There are multiple paths to endorsement. Individuals demonstrate competency by completing a wide range of coursework and specialized in-service training while performing a wide range of paid roles with or on behalf of infants, very young children, and families. There is no one defined way, course, or set of training sessions that exclusively lead to endorsement

Family-Centered Practice: An emphasis on the infant or very young child within the context of the family with respect for the family's strengths and needs as primary when conducting assessments and/or interventions

Graduate Certificate Program in Infant Mental Health: Refers to a university-based program of course work related to infant development, attachment theory, family studies, and relationship-based practice with infants, very young children, and their families.

Infant Family Associate: A professional/service provider who meets the requirements for NMAIMH Endorsement[®] at Level 1

Infant Family Specialist: A professional/service provider who meets the requirements for NMAIMH Endorsement[®] at Level 2

Infant Mental Health: An interdisciplinary field dedicated to promoting the social and emotional well-being of all infants, toddlers, and families within the context of secure and nurturing relationships. Infant mental health services support the growth of healthy attachment relationships in early infancy, reducing the risk of delays or disorders and enhancing enduring strengths

Infant Mental Health Mentor: A professional/service provider who meets the requirements for NMAIMH Endorsement[®] at Level 4

Infant Mental Health Specialist: A professional/service provider who meets the requirements for NMAIMH Endorsement[®] at Level 3

League of States: When a state's infant mental health association has purchased licenses to use the *NMAIMH Competency Guidelines* and the *NMAIMH Endorsement[®]*, they become members of the US League of States. League members meet regularly to support one another in the implementation of the competencies and endorsement. States work together to promote workforce development, reflective supervision/consultation, and to ensure integrity of endorsement policies and procedures across states. Endorsement reciprocity is honored across the League of States. Each state's infant mental health association is an affiliate of the World Association for Infant Mental Health.

Mentor: An experienced infant mental health practice leader who offers guidance, support, and learning opportunities to professionals/service providers within the infant and family field. An Infant Mental Health Mentor meets the requirements for NMAIMH Endorsement[®] at Level 4

NMAIMH Endorsement[®] Advisor: A volunteer who has earned endorsement at Levels 2, 3, or 4, is a member of NMAIMH, and who agrees to guide an endorsement applicant through the NMAIMH Endorsement[®] (IMH-E[®]) process



NMAIMH Endorsement[®] Committee: Members identified by the NMAIMH President and Executive Board to develop the endorsement for infant and family professionals/service providers for the association. The committee works to create and integrate policies that promote workforce development in New Mexico and helps to maintain integrity and reciprocity between League of States affiliates.

Observation: The infant and family professional/service provider's ability to describe what he/she sees when working with infants and families and to examine and reflect on the meaning of those observations with a colleague or supervisor/consultant

Parallel Process: Ability to focus attention on all of the relationships, including the ones between practitioner and supervisor, practitioner and parent(s), and parent(s) and infant/very young child. It is critical to understand how each of these relationships affects the others

Part C of the Individuals with Disabilities Education Improvement Act (IDEA): This program mandates a statewide, comprehensive, multidisciplinary service system to address the needs of infants and very young children who are experiencing developmental delays or a diagnosed physical or mental condition with a high probability of an associated developmental disability in one or more of the following areas: cognitive development, physical development, language and speech development, psychosocial development, and self-help skills. In addition, states may opt to define and serve at-risk children. Commonly cited factors that may put an infant or very young child at risk of developmental delay include low birth weight, respiratory distress as a newborn, lack of oxygen, brain hemorrhage, infection, and prenatal exposure to toxins through maternal substance abuse. In New Mexico, Part C is administered under the name the Family Infant Toddler Program (FIT) and the lead agency is the Department of Health

Professional Development Plan: An individual approach to professional growth within the infant and family field that encourages the fulfillment of requirements for the NMAIMH Endorsement[®] through education, training, and supervised work experiences

Professional Portfolio: The portfolio submitted by endorsement applicant contains the following:

- Official transcripts in a sealed envelope from all colleges/universities attended
- Endorsement Portfolio form with lists of **specialized** education, work, in-service training, and (for Levels 2, 3, & 4) reflective supervision/consultation experiences while working with infants, toddlers, and their families
- Three reference ratings
- Signed Code of Ethics
- Signed Endorsement Agreement
- Proof of membership in NMAIMH or other infant mental health association
- Endorsement Processing Fee

Reference Rating: Three reference ratings are required as part of the professional portfolio submitted by each endorsement applicant. Requirements for who shall provide ratings are specific to the level at which the applicant is applying. Details can be found at <http://www.nmaimh.org/ENDORSEMENT%20MATERIALS.html>. Raters will answer questions about the applicant's level of knowledge and skill in the competency areas defined at the level at which the applicant has applied

Reflective: Self-aware, able to examine one's professional and personal thoughts and feelings in response to work within the infant and family field



Reflective Consultation: An opportunity for professionals/service providers to meet regularly with an experienced infant mental health professional to examine thoughts and feelings in relationship to work with infants, very young children, and families

Reflective Practice: Able to examine one's thoughts and feelings related to professional and personal responses within the infant and family field

Reflective Supervision/Consultation: Supervision or consultation that distinctly utilizes the shared exploration of the parallel process. In addition, reflective supervision/consultation relates to professional and personal development within one's discipline by attending to the emotional content of the work and how reactions to the content affect the work. Finally, there is often greater emphasis on the supervisor/consultant's ability to listen and wait, allowing the supervisee to discover solutions, concepts, and perceptions on his/her own without interruption from the supervisor/consultant

Relationship-Focused Practice: Supports early developing relationships between parents and young children as the foundation for optimal growth and change; directs all services to nurture early developing relationships within families; values the working relationship between parents and professionals as the instrument for therapeutic change; values all relationship experiences, past and present, as significant to one's capacity to nurture and support others

Service Plan: A plan for family guidance, support, and intervention that is discussed and mutually agreed upon by a professional/service provider and parent(s)

Specialized In-Service Training: A training experience that offers opportunities for discussion and reflection about the development, behavior, or treatment of infants and very young children within the context of the family. Examples include half-day or full-day training experiences or training overtime, i.e., 6 hours monthly for 6 months or 3 hours monthly for 12 months. A specialized training that is eligible for endorsement should meet the following criteria:

1. Is culturally sensitive, relationship-focused, and promotes infant mental health
2. Relates to one or more of the competencies in the *NMAIMH Competency Guidelines*
3. Is specific to the level of endorsement at which applicant is applying

Specialized Internship/Field Placement: Either during or after earning a Master's degree and/or a graduate certificate in infant mental health, an endorsement applicant may have participated as a (paid or unpaid) intern in an infant mental health service program. If the intern's supervisor has earned endorsement as an Infant Mental Health Mentor – Clinical (Level 4) or Infant Mental Health Specialist (Level 3), and if the internship lasted for at least one academic year, and if the duties of the intern match the specialized work criteria for the level at which the applicant is applying, then the specialized internship/field placement may count toward one year of the specialized paid work experience criteria for endorsement.

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