Boosting Your Expertise: Infant Mental Health Endorsement[®] in Nebraska Sami Bradley, LIMHP





Nebraska Association for Infant Mental Health



Alliance for the Advancement of Infant Mental Health



Welcome and **Learning Objectives**

- 1. Connect the Nebraska
- 2. Explain how the IMH childhood workforce
- application process

Association for Infant Mental Health's (NAIMH) mission and activities to your work

Endorsement[®] is relevant to the infant and early

3. Identify the steps necessary to begin the IMH Endorsement®

Promoting the mental well-being and health of infant and young children across Nebraska

Currently 115 members across the state

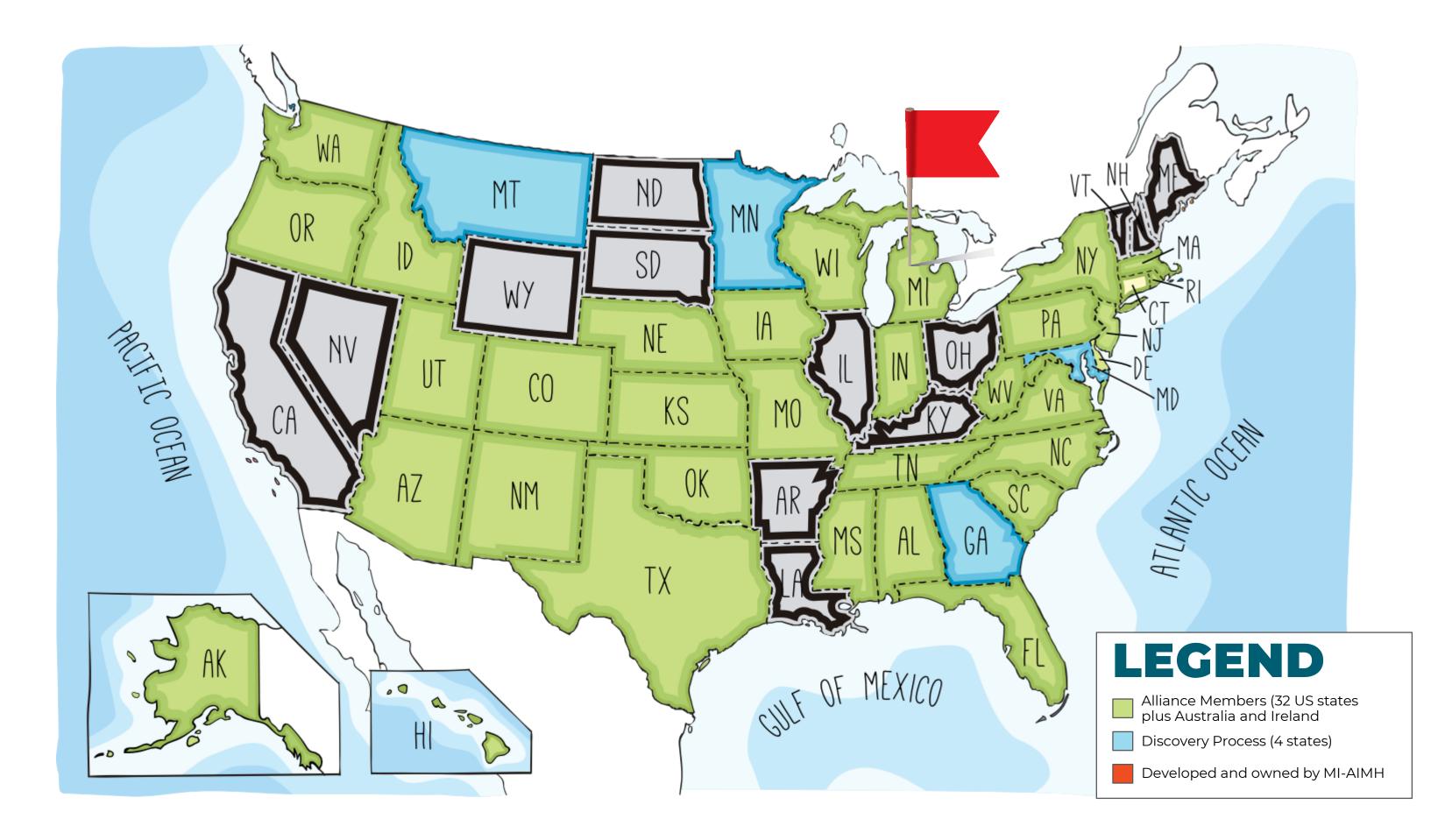
Cross-disciplines

Neutral entity focusing on Infant/Early Childhood Mental Health



Nebraska Association for Infant Mental Health





Infant Mental Health Endorsement[®] Why Nebraska?

Professionals focusing more specifically on issues of infant and early childhood mental health

Cross-disciplinary relevance of infant and early childhood mental health

Provides credibility for professionals engaged in the critical work of supporting young children's social-emotional health and well-being

Formally recognizes infant and early childhood mental health expertise across the state





An addition to a professional's background that recognizes achievement of knowledge and training in the area of infant and early childhood mental health

Work specific to pregnant women, infants, and toddlers (ages 0 up to 3) and their caregivers

One of the first and most comprehensive efforts in the country to identify best practice competencies at multiple levels and across disciplines and to offer a pathway for professional development in the infant, early childhood and family field

Endorsement[®] is not a license or certification

Administered by NAIMH in Nebraska

But I'm not a mental

66

health provider!

INFANT MENTAL HEALTH

The developing capacity from birth to 3 to:

Experience, regulate, and express emotions

Form close relationships

Explore the environment, and learn...all in the context of family, community, and cultural expectations for young children.

(ZERO TO THREE Infant Mental Health Task Force, 2011)

CHILD-FOCUSED **FAMILY-FOCUSED RELATIONSHIP-BASED**



Families?

- continuing education.
- a better therapist."
- treatment approaches."

Why is Endorsement[®] Important for Babies, **Young Children and**

"I think it maximizes my capacity to be fully present with them."

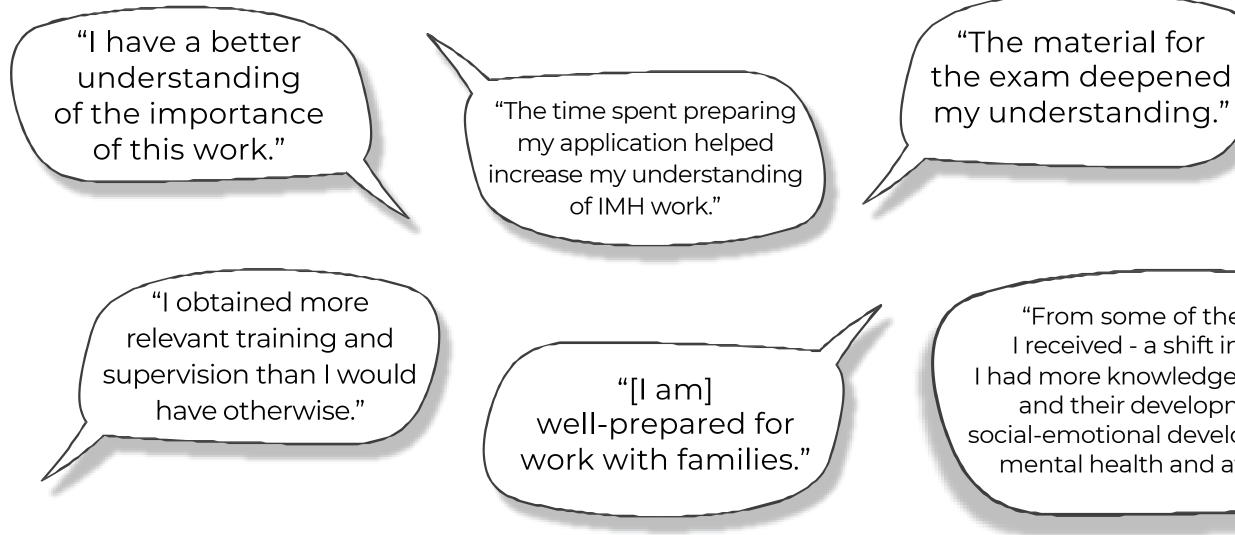
"I'm a more 'well-rounded' clinician due to requirements for RS and

"My knowledge & studies make me

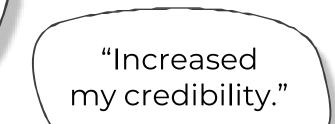
"I am a better advocate in court."

"Increased breadth of knowledge and

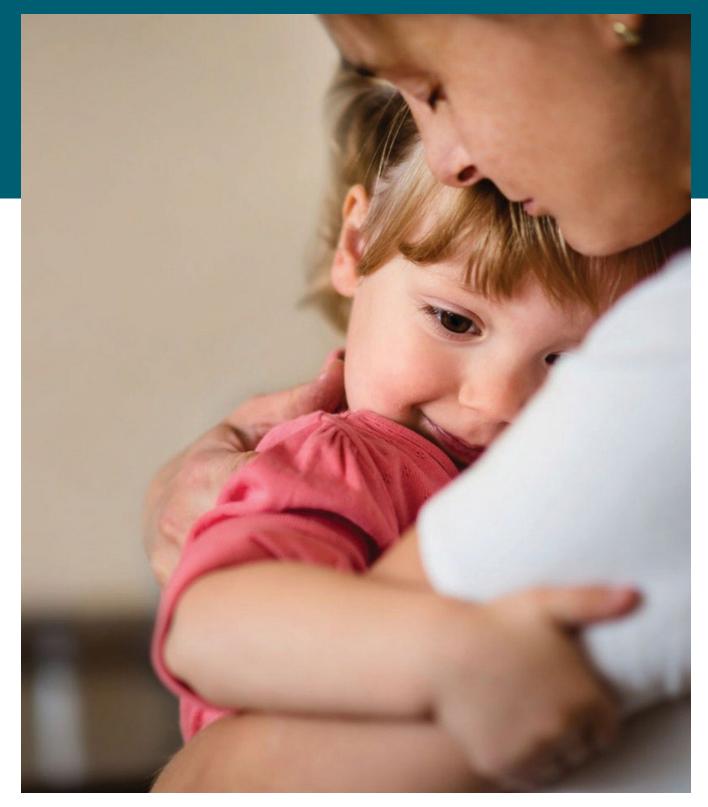
WHY IS ENDORSEMENT® **IMPORTANT FOR ME?**







"From some of the trainings I received - a shift in my focus. I had more knowledge about infants and their development, their social-emotional development, infant mental health and attachment."



CATEGORIES OF ENDORSEMENT® SCOPE OF WORK

PROMOTION Infant Family Associate (IFA)

PREVENTION Infant Family Specialist (IFS)

PREVENTION/EARLY INTERVENTION MACRO Infant Family Reflective Supervisor (IFRS)

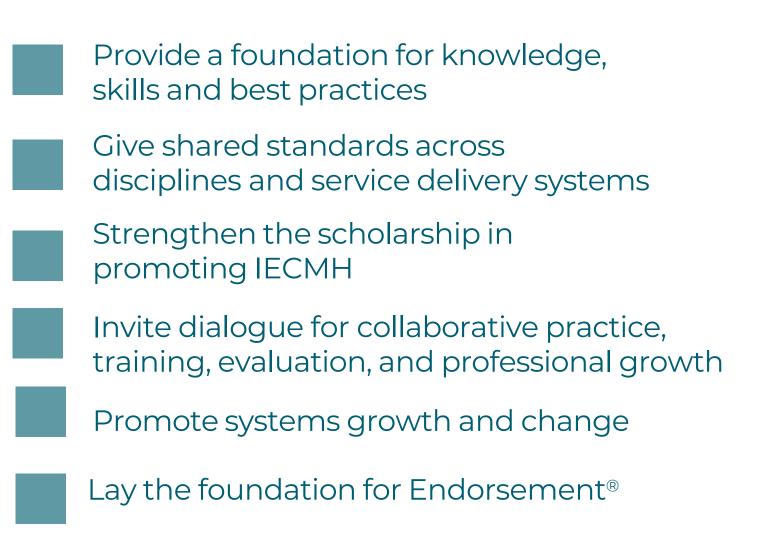
INTERVENTION

Infant Mental Health Specialist (IMHS)

MACRO

Infant Mental Health Mentor (IMHM) Clinical OR Research/Faculty OR Policy

COMPETENCY GUIDELINES®



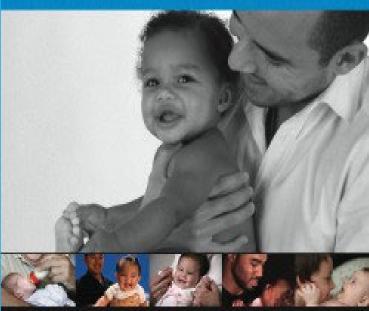
A map that can show you where you have been so you know where you still need to go





STRUCTURE OF THE **COMPETENCY GUIDELINES®**

Competency Guidelines



Eight domains: Theoretical Foundations

Law, Regulation & Agency Policy Systems Expertise **Direct Service Skills** Working with Others Communicating Thinking Reflection







THEORETICAL FOUNDATIONS

COMPETENCY DOMAIN

Theoretical Foundations

KNOWLEDGE/SKILL AREA

Pregnancy & early parenthood Infant/young child development & behavior Infant/family-centered practice **Relationship-based therapeutic practice** Family relationships & dynamics Attachment, separation, trauma, grief & loss **Disorders of infancy & early childhood Cultural competence** Psychotherapeutic & behavioral theories of change Mental & behavioral disorders in adults

DIRECT SERVICE SKILLS

COMPETENCY DOMAIN

Direct Service Skills

KNOWLEDGE/SKILL AREA

Observation & listening Screening & assessment **Responding with empathy** Advocacy Life skills Safety Intervention/treatment planning Developmental guidance Supportive Counseling Parent-infant/very young child relationship-based therapies & practices



REFLECTION

COMPETENCY DOMAIN	KNOWLEDGE
Reflection	Contemplation Self awareness
	Curiosity Professional/personal devel
	Emotional response Parallel process

E/SKILL AREA

elopment

EXAMPLES: SCOPE OF PRACTICE & COMPETENCIES

PROMOTION

Infant Family Associate

Shares with families an understanding of infant/young child and family relationship development

PREVENTION/ EARLY INTERVENTION

Infant Family Specialist

Supports and reinforces each caregivers' strengths, emerging capacities, and positive-infant/ young child interactions and relationships

EXAMPLES: SCOPE OF PRACTICE & COMPETENCIES

INTERVENTION

Infant Mental Health Specialist

Develops service plans that consider each infant's/very young child's and family's unique needs, desires, history, lifestyle, concerns, strengths, resources, cultural community, and priorities

MACRO/LEADERSHIP

Infant Mental Health Mentor

Promotes an IECMH service delivery that includes screening, referral assessment, use of diagnostic tools, development of trusting relationships, service planning, interagency collaboration, etc.

Reflective Supervision/Consultation (RSC)

Specific type of supervision that is the standard of practice in the infant-early childhood & family field.

Distinction due to the shared exploration of the parallel process.

- All of the relationships are important
- How do each of these relationships • affects the others?
- Attends to the emotional content • of the work and how reactions to the content affect the work.





PROMOTION INFANT FAMILY ASSOCIATE

Education/ **Work Experience**

Any academic degree OR Child Development Associate OR Associate's degree OR 2 years early childhood experience (including specific related volunteer experience)





PREVENTION/EARLY INTERVENTION INFANT FAMILY SPECIALIST

Education

None required

Work Experience

(minimum 2 years paid)

Minimum of 10 families of children 0-36 months / 3 up to 6 years

- Primary focus of services is social-emotional needs
- Include attention to the relationships surrounding the child's mental health (must include primary caregiver)

Reflective Supervision/ Consultation

- and families
- RSC provider must meet requirements for Clinical or an approved vetted provider

• Minimum 24 clock hours within 1-2 year time frame while providing services to infants/young children

Endorsement[®] at IFS (Masters), IMHS, or IMHM-

· Ongoing RSC is required for annual renewal

PREVENTION/EARLY INTERVENTION-MACRO INFANT FAMILY REFLECTIVE SUPERVISOR

Education

None required

Work Experience

(minimum 2 years paid)

Minimum of 10 families of children 0-36 months / 3 up to 6 years

- Primary focus of services is social-emotional needs
- Include attention to the relationships surrounding the child's mental health (must include primary caregiver)

Reflective Supervision/ Consultation

- RSC provider must meet requirements for Clinical or an approved vetted provider

Leadership

Minimum 1 year leadership activities

• Minimum 24 clock hours within 1-2 year time frame while providing services to infants/young children and families. 12 hours about the RC that is provided

Endorsement[®] at IFS (Masters), IMHS, or IMHM-

· Ongoing RSC is required for annual renewal

INTERVENTION/TREATMENT INFANT MENTAL HEALTH SPECIALIST

Education

Masters or Above

Specialized Work Experience

- 2 years post graduate, supervised; with infant/young child and their primary caregiver(s) on behalf of their relationship
- 1 year supervised graduate internship with direct IMH practice may be counted toward the 2 year paid work experience requirement

Reflective Supervision/ Consultation

- Minimum 50 clock hours in 1-2 year timeframe while providing specialized work
- RSC provider must meet requirements for Endorsement[®] at IMHS, or IMHM/Clinical or an approved vetted provider
- Ongoing RSC is required for annual renewal

Successful completion of the written exam



LEADERSHIP INFANT MENTAL HEALTH MENTOR

Leadership

 Demonstrates leadership/mentorship in the infant/young child and family field.

3 Designations

- Clinical •
- Research/Faculty
- Policy •



LEADERSHIP **INFANT MENTAL HEALTH MENTOR**

Education

MA, MS, MSW, MEd, MSN, EdD, PsyD, PhD, MD, DO, or other specific to professional focus on Infant Mental Health

Specialized Work Experience

Clinical: Meets IMHS/ECMHS requirements PLUS has served as a provider of IMH/ECMH RSC for 3 years or more

Policy and Research/Faculty: 3 years post-graduate experience as a leader in IMH/ECMH policy and/or program administration OR University teaching and/or published research

Reflective Supervision/ Consultation

- Minimum 50 clock hours in 1-2 year timeframe •
- **Required for Clinical ONLY** •
- Ongoing RSC is required for annual renewal •
- Optional for Policy, Research/Faculty •

Successful completion of the written exam



REQUIREMENTS + COMPETENCIES = ENDORSEMENT®

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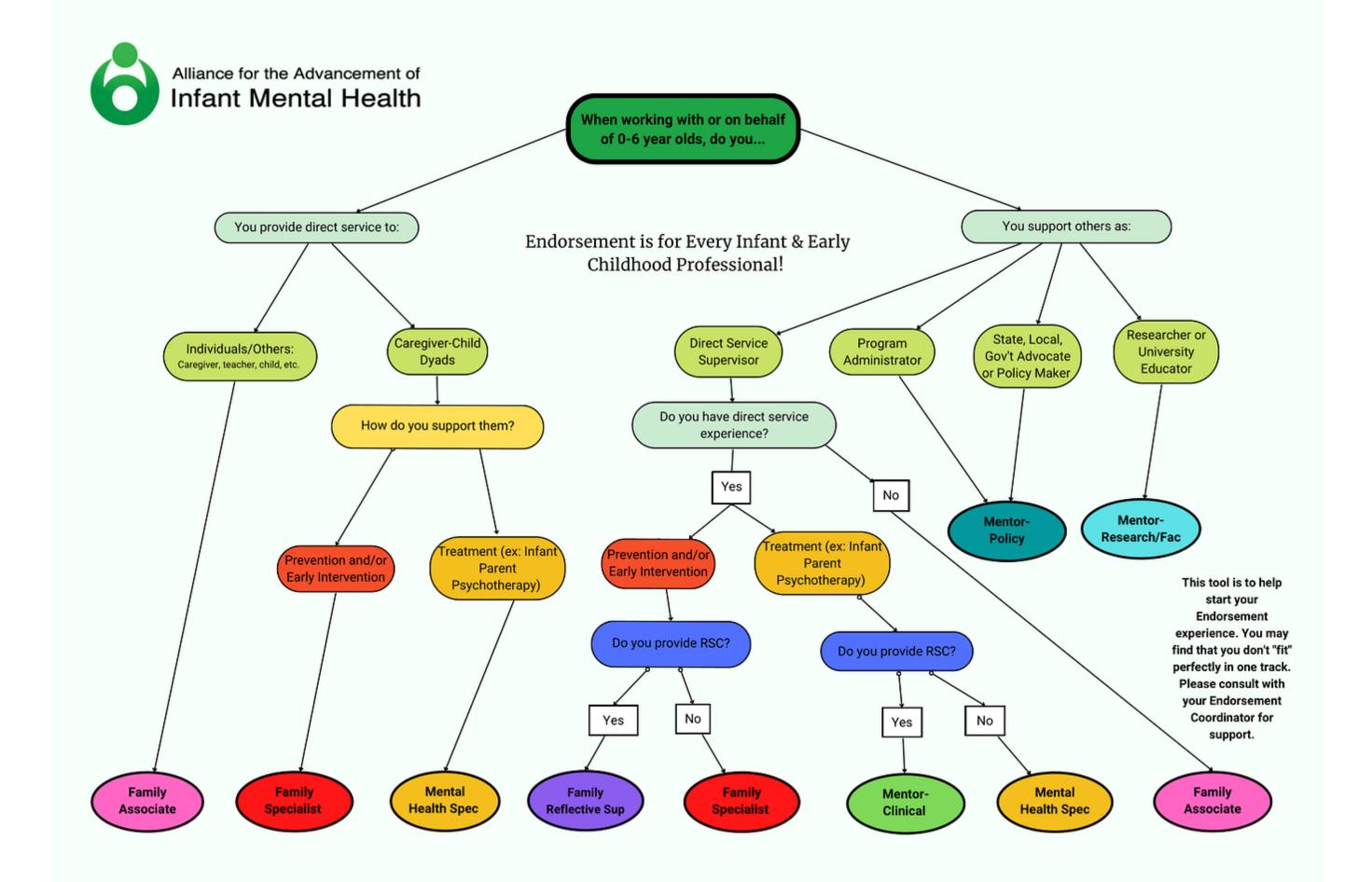
Endorsement[®] **Category Requirement**

Filling:

Endorsement® Compentencies







WHAT ARE MY NEXT STEPS?

- **Register as a NAIMH member** 1.
- 2. **Register on EASy**
- Endorsement Coordinator verifies fees paid and reviews for appropriate 3. category of application
 - Complete required fields re: education, work, and RSC history as relevant to the category at which you are applying
 - Upload CV/resume
 - Select Endorsement[®] Category
 - Pay Registration Fee
- EASy sends you your username and password 4.
- **Endorsement Coordinator emails you next steps** 5.



WHAT ARE MY NEXT STEPS?

6. Application preparation

Endorsement Agreement, Code of Ethics, Education, Work, Training, Leadership, RSC, References, & Transcripts

7. Documentation of Competencies Match competencies met in areas of education & training General Rule: 1 Competency = 1 Hour of Training

> **Endorsement® is a journey, not a race!** If you have questions along the way contact the Endorsement Coordinator





WHAT ARE MY NEXT STEPS?

Submit application 8.

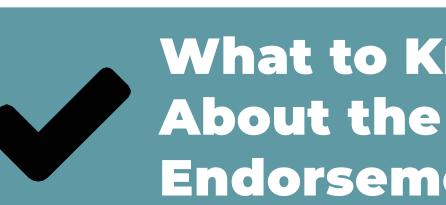
Next Deadline:

11/30/2022

- Pay processing fee 9.
 - Peer Review
 - IMHS and IMHM notified of eligibility to sit for exam or deferred based on application review
- 10. Examination
 - IMHS and IMHM only
 - Part I: Multiple (all categories)
 - Part 2: Essay response to vignettes tailored re: category
- **11. Endorsement® or Deferment**
 - Feedback given on strengths and areas for growth



ENDORSEMENT EXAM RESOURCES



Examination **Tip Sheets**

Exam Preparation List

What to Know **Endorsement Exam**

Endorsement



FOR MORE INFORMATION:

www.neinfantmentalhealth.org

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Holly Hatton-Bowers hattonb@unl.edu



Contact: Endorsement Coordinator Melissa Villarreal Ne.imhendorsement@gmail.com