

**MATRICES AND GUIDELINES
FOR THE INFANT-FAMILY AND
EARLY CHILDHOOD
MENTAL HEALTH SPECIALIST**

PROVIDING INFANT-FAMILY AND EARLY CHILDHOOD MENTAL HEALTH SERVICES

INFANT-FAMILY AND EARLY CHILDHOOD MENTAL HEALTH SPECIALIST

Domain 1: Knowledge		
A: Parenting, Caregiving, Family Functioning, and Child-Parent Relationships		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Range of family structure • Pregnancy and childbirth • Postpartum period • Attachment issues • Parenting as a developmental process • Family dynamics • Family expectation regarding child development • Providing family-sensitive services • Cultural issues in parenting and family development • Goodness of fit between parents and young children • Importance of relationships to development • Family systems 	32	<ul style="list-style-type: none"> • Demonstrates an understanding of optimal health during pregnancy. • Demonstrates an understanding of the birthing process and impacts on the family. • Demonstrates an understanding of healthy attachment after birth and the importance of the postpartum period on the newborn. • Demonstrates an understanding of family and parenting function as a lifelong developmental process beginning before conception. • Demonstrates an understanding of different patterns of parent-infant interaction and attachment and their impact on child outcomes. • Is knowledgeable about the emergence of communicative intent and gestural communication in dyadic interaction during the first year of life. • Understands the complexity of interrelationships between infant and caregivers within an environmental context and demonstrates a variety of appropriate strategies to support and promote family well-being. • Uses a variety of techniques to facilitate and reinforce positive parent-infant interaction and enhances parents' capacity to be responsive and sensitive to their baby. • Is aware of the potential negative impact of multiple separations and/or multiple family placements on early development. • Is aware of and able to competently engage with a wide range of family structures, family dynamics, and cultural influences on family functioning. • Understands assessment of difficulties in parent-child relationships as outlined by Axis 2 and PIRGAS of DC:0-3R, and the implications for relationship-focused interventions. • Understands strategies for facilitating change and growth processes in families with significant problems in relationships at the representational, dyadic, and systemic levels. • Demonstrates reflective insight into personal relationship history and dynamics and understands importance of one's own awareness in context of therapeutic relationships with families.

B: Infant, Toddler, and Preschool Development		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Typical development in infancy, toddler, and/or preschool periods • Milestones of development • Peer relationships • Expectations of children in groups • Cultural variations in development and family expectations 	36	<ul style="list-style-type: none"> • Understands the developmental sequences and range of variation across multiple dimensions of child development, beginning prenatally and including sensory, motor, cognitive, communication, play, self-regulatory, and social-emotional domains. • Demonstrates an understanding of the importance of development of self-regulation, early childhood social relationships, communication and representational skills, and executive function abilities for school readiness. • Understands social-emotional development in a dyadic relationship context, as outlined by Axis 5 of the DC:0-3R, and exemplified as social-emotional milestones, which may begin prenatally, and the implications for treatment of atypical dyadic emotional development. • Accurately interprets information from direct and reported information, observations, and assessments in a range of settings to identify capacities and strengths, as well as developmental delays and/or emotional disturbances in infants and young children served. • Uses collaborative approaches to explore appropriate family expectations and provides developmental guidance in achieving strategies that support those expectations. • Suggests, demonstrates, and coaches families on strategies to nurture a child's development across all domains, including their strengths, emerging capacities, and cultural values. • Understands social-emotional development and the role of peer and group interactions and can utilize a range of strategies for promoting optimal interactions.
C: Biological and Psychosocial Factors Impacting Outcomes		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Temperament • Regulatory and sensory issues • Brain research • Neuro-developmental issues • Prematurity and low birth weight • Child abuse • Child neglect • Nutrition • Poverty • Community issues • School and community services • Impact of such factors upon development and relationships 	24	<ul style="list-style-type: none"> • Accurately interprets the bi-directional nature of biological and psychosocial circumstances that influence infant brain development, parent-child relationships, and the regulation of emotions and behavior, including genetics, low birth weight, undernutrition, substance exposure, disability, and the impact of family discord and trauma. • Can identify and address family and child health factors, including nutrition, and their role in child and family outcomes from preconception onward. • Can identify and assess infant/child/adult states of arousal and how they are regulated and modulated. • Understands the concept that prolonged unaddressed stress in the infant/child/parent or dyad affects all domains of development and that chronic stress may lead to subsequent interference with brain development and emotional regulation. • Identifies and addresses prolonged stress as a focus of intervention. • Comprehends that over-reactivity, under-reactivity or a combination of both to sensory information can disrupt typical development and is able to provide appropriate intervention where there is a mismatch between the parent and the infant or child. • Recognizes and works to combat the adverse effects of poverty and marginalization.

D: Risk and Resiliency		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Atypical development • Maternal depression • Teenage parenting • “Ghosts” in the nursery • Chronic physical illness • Chronic mental illness in parents • Developmental disabilities • Prematurity • Communication and interaction problems • Substance abuse in families • Family violence • Working with challenging caregivers • Foster care • Institutional care • Factors that promote resiliency and help to insulate families from risk • Promoting resiliency in young children and families 	36	<ul style="list-style-type: none"> • Demonstrates a theoretical understanding of the cumulative risk factors that affect family well-being and parent-child relationships for infants and young children and their families and communities stemming from a variety of sources. • Demonstrates a theoretical understanding of the resilience factors that allow infants, toddlers, and preschoolers to positively adapt despite significant life adversities. • Applies concepts of resilience to guide treatment planning assessment and interventions with children and families. • Demonstrates an ability to modulate intervention style and strategies in response to specific strengths and vulnerabilities of each infant, child, and family. • Demonstrates an ability to consider culture and context as well as risk factors in planning assessment and interventions. • Demonstrates the ability to identify and address parent-family difficulties that negatively impact the parent-child relationship and infant’s or child’s social-emotional development.
E: Observation, Screening, and Assessment		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Development of observational skills with infants and young children • Use of observational information • Use of screening tools • When to make referrals for more comprehensive assessment • How to make a referral, including following through or assisting family with initial contacts • Introduction to major assessment instruments and processes 	60	<ul style="list-style-type: none"> • Demonstrates an understanding of assessment as intervention. • Successfully uses a wide range of strategies in varied settings to reach and engage families. • Demonstrates an understanding of how to use observation, screening, and assessment to determine necessary components for the individual infant, young child, and family. • Selects and uses screening and assessment practices appropriate to pregnant and postpartum parents, including screening for depression. • Incorporates observations of the infant and young child in multiple settings including play, child-parent interactions, early care and education settings, and home into every assessment of the child. • Demonstrates an understanding of and ability to integrate a multidimensional assessment of an infant or young child, utilizing information from other providers and caregivers as appropriate, inclusive of health, physical, social, emotional, psychological, and cultural aspects from a developmental and relational perspective. • Understands how to select and use specific components of assessments for birth to 5-year-olds and their caregivers within scope of practice and training.

		<ul style="list-style-type: none"> • Uses components of assessment including observations, interviews, standardized and non-standardized tests, and other professional reports, as appropriate, to provide multidimensional assessment with appropriate interpretation and application of findings in the design of interventions. • Can, through observation and interview, recognize challenges to adults functioning as parents, including signs of substance abuse, developmental delay, mental illness, etc. and provide appropriate referrals and interventions. • Demonstrates an ability to integrate multiple sources of information into a cohesive, family friendly report.
F: Diagnosis and Intervention		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Diagnostic systems for infants, toddlers, and young children • Linking assessment and diagnosis to intervention • Effective communication with caregivers and others • Concrete assistance • Community resources • Developmental guidance • Strategies to promote infant-family and early childhood mental health • Strategies for preventive intervention addressing social-emotional-behavioral vulnerabilities • Intervention strategies • Therapeutic options, including current knowledge of evidence-based practice • Developing reflective practice skills • Use of self in provision of services 	60	<ul style="list-style-type: none"> • Uses the DC: 0-3R and DSM-IV to diagnose problems in very young children and can provide the “cross-walk” diagnosis between the two systems within their scope of practice. • Recognizes intervention must be developed immediately following recognition of a child’s developmental risk in order to minimize the likelihood of failure to progress. • Integrates information and formulates plans together with a family. • Understands and addresses the importance of and need for concrete assistance, developmental guidance, crisis management, and advocacy in therapeutic and developmental work with families of infants and toddlers. • Demonstrates an understanding of basic principles of a variety of individual, dyadic, and family therapeutic approaches to promotion, preventive intervention, and intervention (treatment). • Demonstrates knowledge of and skill in implementing developmentally appropriate, evidence-based and best practice interventions. • Provides developmental guidance and implements developmentally appropriate strategies for common problems in early childhood (tantrums, sleeping, eating, crying, regulation). • Provides resources for related services, such as primary care, child welfare, mental health, or social services. • Is able to monitor progress and problems with intervention in writing, make adjustments as needed, and maintain ongoing communication and collaboration with family and other agencies or providers regarding their perceptions and concerns.
G: Interdisciplinary/Multidisciplinary Collaboration		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Understanding the roles of other professionals in working with young children and families • Respecting boundaries of practice 	8	<ul style="list-style-type: none"> • Demonstrates an ability to assemble an interagency and interdisciplinary team in which team and family members exchange information and learn from one another. • Demonstrates awareness that relationships with other providers will have an effect on their relationships with the child and family.

<ul style="list-style-type: none"> • Community resources • Working together with other professionals to create an integrated plan • Collaborating to prioritize child and family needs 		<ul style="list-style-type: none"> • Demonstrates the importance of sensitive, respectful, and effective communication with other providers of services to the child and family. • Demonstrates knowledge of the existence of a wide variety of resources and systems providing services to young children and families. • Understands limits and boundaries of practice and makes appropriate referrals.
H: Ethics		
Key Concepts	Hours	Competencies
<ul style="list-style-type: none"> • Ethics of scope of practice • Working ethically in family settings 	4	<ul style="list-style-type: none"> • Demonstrates self-awareness and the ability to reflect on one's impact on families and vice versa. • Demonstrates a clear understanding of scope of practice as defined by license, certification, and/or position/role and seeks consultation when questions arise. • Demonstrates a clear understanding of scope of areas of personal competency as determined by training and experience and seeks consultation when questions arise. • Maintains appropriate boundaries with families and other professionals. • Keeps abreast of new scholarship and evolving notions of best practice in areas of competence through reading, continuing education, consultation, etc. • Recognizes and supports the cultural beliefs and values of families. • Recognizes the significance of socio-cultural and political contexts of children from diverse backgrounds. • Makes effective use of reflective practice facilitation and/or supervision.
Domain 2: Clinical Experience/Reflective Practice Facilitation		
Key Concepts		
<ul style="list-style-type: none"> • Clinical experience with families and children prenatal to age 3 and/or • Clinical experience with children 3 to 5 and their families • Reflective practice facilitation 		<p>500 hours of clinical experience prenatal to age 3, including</p> <ul style="list-style-type: none"> • 60 hours reflective practice facilitation for prenatal to age 3 <ul style="list-style-type: none"> • 10 hours minimum of 1:1 reflective practice facilitation • 10 hours minimum of 1:group supervision of up to 8 reflective practice facilitation • 40 hours of either individual or group facilitation and/or <p>500 hours of clinical experience for 3- to 5-year-olds, including</p> <ul style="list-style-type: none"> • 60 hours reflective practice facilitation for 3- to 5-year olds <ul style="list-style-type: none"> • 10 hours minimum of 1:1 reflective practice facilitation • 10 hours minimum of 1:group supervision of up to 8 reflective practice facilitation • 40 hours of either individual or group facilitation

Combined Competencies: Domains 1 & 2

Key Concepts	Hours	
<ul style="list-style-type: none">• 260 hours knowledge• 500–1000 hours clinical experience with reflective practice facilitation	760–1260	<ul style="list-style-type: none">• 760 hours prenatal to 3 or 3 to 5 only.• 1260 hours prenatal to 5 endorsement.