Competency Guidelines

MI-AIMH Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant and Early Childhood Mental Health®.

03/18/2025

Early Childhood Family Specialist

The EARLY CHILDHOOD FAMILY SPECIALIST Competency Guidelines were developed by the Michigan Association for Infant Mental Health to clearly describe the areas of expertise, responsibilities, and behaviors that demonstrate competency for this category.

Guidelines

Theoretical Foundations

Knowledge areas	As demonstrated by
Pregnancy and Early Parenthood	 Supports and reinforces parent's/primary caregiver's ability to seek appropriate care during pregnancy
Infant/Young Child Development & Behavior	 Demonstrates awareness of conditions that optimize early infant brain development Shares with families the realistic expectations for the development of their infants/young children and strategies that support those expectations
Infant/Young Child/Family Centered Practice	During observations and assessments, identifies emerging competencies of the infant and young child within a relationship context

Knowledge areas	As demonstrated by
Relationship-focused Therapeutic Practice	 Supports and reinforces each parent's/primary caregiver's strengths, emerging caregiving competencies, and positive caregiver-infant/young child interactions and relationships Helps parent/primary caregiver to: "See" the infant/young child as a person, as well as all the factors (playing, holding, teaching, etc.) that constitute effective caregiving of that child Derive pleasure from daily activities with their children
Family Relationships and Dynamics	 Shares with families an understanding and appreciation of family relationship development
Attachment, Separation, Trauma, Grief & Loss	 Supports emerging competencies of the infant/toddler within an attachment relationship context; recognizes risks related to histories of separation, trauma and/or grief/loss that may require assistance of other professionals
Cultural Humility	 Applies understanding of cultural humility to communicate effectively, establish positive relationships with families, and demonstrate respect for the uniqueness of each client family's culture
Disorders of Infancy/Early Childhood	 Recognizes risks and disorders of infancy/early childhood conditions that require the assistance of other professionals from health, mental health, education, and child welfare systems

Law, Regulation & Policy

Knowledge areas	As demonstrated by
Ethical Practice	 Exchanges complete and unbiased information in a supportive manner with families and other team members Practices confidentiality with each family's information in all contexts, with the only exception being when making necessary reports to protect the safety of a family member (e.g., Children's Protective Services, Duty to Warn)

Knowledge areas	As demonstrated by
Government, Law &	Personally works within the requirements of:
Regulation	Federal and state law
	 Agency policies and practices
	 Agency code of conduct
	 Promptly and appropriately reports harm or threatened harm to a child's
	health or welfare to Children's Protective Services after discussion with supervisor
	 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, early care and education licensing rules and regulations) to families
	 Shares information with non-citizen families and service agencies about the rights of citizen children of non-citizen parent/primary caregiver(s)
Agency Policy	 Maintains appropriate personal boundaries with infants/young children and families served, as established by the employing agency

Systems Expertise

Knowledge areas	As demonstrated by
Service Delivery Systems	 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 parent/primary caregiver build the skills they need to access social support from extended family, neighbors, and friends as needed and as available in the community
Community Resources	 Makes families and service providers/agencies aware of community resources available to families Assists families to anticipate, obtain, and advocate for concrete needs and other services from public agencies and community resources Actively seeks resources to address the needs of infants/young children and families

Direct Service Skills

Knowledge areas	As demonstrated by
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Life Skills	 Promotes caregiver competence in: Facing challenges Advocating on behalf of themselves and their children Resolving crises and reducing the likelihood of future crises Solving problems of basic needs and familial conflict Nurtures the parents/primary caregivers'/primary caregivers' relationship with each other, if one exists; alternatively, helps the custodial parent/caregiver manage appropriate contact with the non-custodial parent/caregiver
Observation and Listening	 Formally and informally observes the parent/primary caregiver(s) and infant/young child to understand the nature of their relationship, developmental strengths, and capacities for change
Screening and Assessment	 Conducts formal and informal assessments of infant/young child development, in accordance with established practice Effectively implements relationship-focused, therapeutic parent/caregiver-infant/young child interventions that enhance the capacities of parent/primary caregiver(s) and infants/young children
Responding with Empathy	 Establishes trusting relationship that supports the parent/primary caregiver(s) and infant/young child in their relationship with each other, and that facilitates needed change Provides information and assistance to parent/primary caregiver(s) to help them: 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
Advocacy	 Provides services to children and families with multiple, complex risk factors Advocates for services needed by children and families with the supervisor, agencies, and other available programs
Safety	 Recognizes environmental and caregiving risks to the health and safety of the infant/young child and parent/primary caregiver(s), and takes appropriate action

Working With Others

Knowledge areas	As demonstrated by
Supporting Others/Mentoring	 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 Encourages parent/primary caregiver to share with other parent/primary caregiver (eg, through nurturing programs, parent-child interaction groups)
Building & Maintaining Relationships	 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/primary caregivers' lead Following through consistently on commitments and promises Provides positive, specific feedback to encourage and reinforce desired behaviors and interactions in families
Collaborating	 Collaborates and shares information with staff of child care, foster care, community-based programs, and other service agencies to ensure effective, coordinated services
Resolving Conflict	 Works constructively to find "win-win" solutions to conflicts with colleagues (eg, interagency, peer-peer, and/or supervisor-supervisee conflicts)
Empathy & Compassion	 Works with and responds to families and colleagues in a tactful and understanding manner Provides emotional support to parents/primary caregivers/caregivers and children when sad, distressed, etc

Communicating

Knowledge areas	As demonstrated by
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Listening	 Actively listens to others and asks questions for clarification Obtains translation services as necessary to ensure effective communication with families who may experience a communication barrier
Speaking	 Uses appropriate non-verbal behavior and correctly interprets others' non-verbal behavior Communicates honestly, sensitively, and empathetically with families, using non-technical language
Writing	 Writes clearly, concisely, and with the appropriate style (eg. business, conversational, etc) in creating notes, reports, and correspondence

Thinking

Knowledge areas	As demonstrated by
Analyzing Information	Sees and can explain the "big picture" when analyzing situations
Solving Problems	 Considers difficult situations carefully Integrates all available information and consults with others when making important decisions Generates new insights and workable solutions to issues related to effective relationship-focused, family-centered care
Exercising Sound Judgment	Evaluates alternatives prior to making decisions
Maintaining Perspective	 Sees and can explain the interactions of multiple factors and perspectives
Planning & Organizing	 Assigns priorities to needs, goals, and actions 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, ensuring follow up, and monitoring the effectiveness of service delivery as a whole

Reflection

Knowledge areas

Contemplation	 Seeks a high degree of agreement between self-perceptions and the way others perceive them
Self Awareness	 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, and peers to understand own capacities and needs, as well as the capacities and needs of families
Curiosity	Remains open and curious
Professional/Personal Development	 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-focused practice
Emotional Response	 Uses reflective practice throughout work with infants/young children and families to understand own emotional response to infant/family work and recognize areas for professional and/or personal development

Requirements

Documentation of Competencies

Application will document that most competencies have been adequately met through course work, in-service training and work/volunteer experiences and professional references.

Professional Membership

Membership in an association for infant mental health

Endorsement Agreement

Signed

Code of Ethics

Signed

Education

No degree requirement

Work Experience

Minimum two years of paid professional work experience providing prevention and/or early intervention services that promote early childhood mental health. Work experience meets this criterion as long as the applicant has:

- 1. Served a minimum of 10 families where the target of services is a child aged 3 up to 6 years old, and
- 2. A primary focus of the services provided is the social-emotional needs of the 3 up to 6 years old child and their families/caregivers, and
- 3. Services focus on the promotion of the relationships surrounding the 3 up to 6 year olds

Training

Minimum 33 clock hours of trainings must pertain to the promotion of social-emotional development of children (prenatal to 6 years) and/or other relationship-based principles and practices of infant/early childhood mental health.

Reflective Supervision/Consultation

A minimum 24 clock hours received of relationship-based, reflective supervision/consultation (RSC), individually or in a group from a qualified provider while having one of the following work experiences:

providing (or providing supervision to staff who are providing) services to infants, young children (3 to 6 years old), and families

and/or

• providing (or providing supervision to staff who are providing) mental health consultation services (3 to 6 years old) through a relational lens with a focus on social emotional development

Qualified providers of RSC must meet Endorsement requirements as an Endorsed Reflective Supervisor or Mental Health Mentor-Clinical.

Professional Reference Ratings

Total of three ratings:

- 1. One from a current program supervisor
- 2. One from person providing reflective supervision/consultation
- 3. One from another supervisor, teacher, trainer, consultant, or colleague

Renewal

Training

A minimum of 45 clock hours of training is required over the 3-year cycle, focused on the promotion of socialemotional development of children (prenatal to 6 years) and/or other relationship-based principles of infant/early childhood mental health.

Endorsed Mid-Cycle Adjustment: Endorsed for 2 years at time renewal, complete 30 hours; Endorsed for 1 year at time of renewal, complete 15 hours; If not endorsed for 1 year exempt from renewal.

Professional Membership

Membership in an association for infant mental health

Mid-Cycle Adjustment: No change – active membership applies regardless of years of Endorsement.

Reflective Supervision/Consultation

A minimum of 36 clock hours of reflective supervision/consultation is required over the 3-year cycle (equivalent to 12 hours/year).

Endorsed Mid-Cycle Adjustment: Endorsed for 2 years at the time of renewal complete 24 hours; If endorsed for 1 year at the time of renewal complete 12 hours; If not endorsed for 1 year exempt from renewal.

