

INFANT MENTAL HEALTH ENDORSEMENT® (IMH-E®) REFERENCE FORM APPLICANT'S WAIVER CERTIFICATE

Name of Endorsement® Applicant:			
Please Print:	(Last)	(First)	
TO THE APPLICANT: You may voluntarily waive written about you in accordance with The Federa this certificate.			
I waive, relinquish and disclaim all my rights to	o have acces	s to the Professional Refer	ence Form for Endorsement®.
Applicant's Signature		Date	
	MENTAL H	FORM FOR ENDORSEM EALTH MENTOR – POL IM-P)	
To be completed by supervisor/mentor/consul	tant/teach	er/colleague (circle).	
Name of individual serving as reference:			
Category of Endorsement® for which individual i	s applying:		
You have been selected to complete the reference from a member infant mental health association establish the applicant's eligibility for Endorseme work with the applicant. It is not necessary to ha familiar with the applicant's knowledge & skill bar Please note that if the applicant does not waive he you provide may be shared with the applicant, if standards for service providers and professionals.	(IMHA) of thent®. Please we directly on his/is or her rigrequested.	ne Alliance. The information provide a rating on each it observed the applicant perfer descriptions, affect, refets to have access to this Refeath you for your contrib	n that you provide will help to em based on the context of your form his/her role if you are lections, and changes over time. eference Rating, the information
For more information about the Endorsement® r	equirement	s and Competency Guideline	es®, please go to <u>allianceaimh.org</u> .
Name of Applicant:			_
Applicant's Address:			_
Applicant's Daytime Telephone (including area	code):		

The rating scale is:
0 – I do not have enough information to rate/comment 1 – Minimal Ability 2 – Below Average Ability 3 – Average Ability 4 – Above Average Ability 5 – Exceptional Ability
Theoretical Foundations 1. Demonstrates knowledge of and communicates to others knowledge in the areas of pregnancy, prenatal development and early parenthood roles. (<i>Pregnancy & Early Parenthood</i>) 0 1 2 3 4 5
2. Demonstrates knowledge of and communicates to others typical and atypical infant and toddler development and behavior within a relationship context. (Infant/ Young Child Development & Behavior) 0 1 2 3 4 5
3. Develops or impacts policy and practice intended to increase the extent or effectiveness of infant mental health interventions. (Infant / Young Child Equily Contoured Practice)
interventions. (Infant/ Young Child-Family Centered Practice) 0 1 2 3 4 5
4. Supports and promotes services that reinforce and nurture the caregiver-infant/ toddler relationship. (<i>Relationship-Focused Therapeutic Practice</i>)
0 1 2 3 4 5
5. Has knowledge of family relationship development. (Family Relationships & Dynamics) 0 1 2 3 4 5
6. Demonstrates knowledge of and communicates to others emerging competencies of the infant/ toddler within a relationship context; recognizes risks related to histories of separation, trauma, and/or loss that may require assistance of other professionals. (Attachment, Separation, Trauma, Grief & Loss) 0 1 2 3 4 5
7. Applies understanding of culture competence to communicate effectively and establish positive relationships with a wide range of people and organizations. (<i>Cultural Competence</i>) 0 1 2 3 4 5
8. Promotes informal and formal observations and assessments to identify capacities and strengths, as well as
developmental delays and/or emotional disturbance in infant/ toddler services. (Disorders of Infancy/Early Childhood) 0 1 2 3 4 5
9. Supports and promotes development of service plans that account for unique needs, desires, history, lifestyle, concerns,
strengths, resources, and priorities of each infant/toddler and family. (<i>Psychotherapeutic & Behavioral Theories of Change</i>) 0 1 2 3 4 5
10. Understands and promotes in policy accepted diagnostic tools and classification systems for adult mental disorders and substance abuse. (<i>Mental and Behavioral Disorders in Adults</i>) 0 1 2 3 4 5
11. Promotes, develops, and delivers effective learning interventions as part of conferences, workshops, university courses, and other opportunities to educate on effective infant mental health principles and practice. (<i>Adult Learning Theory & Pagatics</i>)
Theory & Practice) 0 1 2 3 4 5
12. Encourages use of data to improve infant mental health practice. (Statistics) 0 1 2 3 4 5

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Dvaraac	0	1	2	3	4	5								
	gulation			ah assi assa	المستعمدان	o ot the o Fr	. d		'ada a	of Ealai as	. (E4hi	a a l. Duca e	ati a a)	
14. Dei	nonstrate 0	s and pro	2	3	4	5	iuorsei	nentw C	oue c	of Ethics	s. (Etillo	zui Pruc	ilice	
	derstands g infants/ 0													
conclus	en consul ions and : (<i>Agency F</i>	recomme												, develops text of
	0	1	2	3	4	5								
17. Utili	s Expert i izes an ex	pert knov				ery syste	ms and	commu	nity r	esource	s to ma	ke deci	sions an	d
recomn	nendation 0	ıs. (<i>Servic</i> 1	e Deliver 2	y Systems 3	5) 4	5				N				
	erstands n informal 0					al servic	e delive	ery syste	ems, tl	hrough	commu	nity re	sources,	and
19. Proi	Service S motes the coddler to ation & Li	developi understa	ment of o and the n	others to fature of t	formally heir rela	and info tionship 5	rmally o	observe pmenta	the pa	arent(s] ngths, a) or care	egiver(: acities f	s) and or chang	e.
	motes infa (<i>Screenin</i> 0			ce system	delivery	that inc	ludes s	creening	g, refe	erral ass	essmer	nt and u	se of dia	gnostic
infant/t	motes pol coddler, tl ing. (<i>Resp</i> 0	ne parent	/caregive	er, and/o										otional
22. Adv	vocates fo acy) 0	r services	s needed	by infant	s/toddle	ers and fa	ımilies a	and enco	ourag	es the u	se of da	ata to in	nprove p	oractice.
	nonstrate es approp		o recogni	ize enviro			egiving	risks to	the h	ealth of	f the inf	ant/too	ldler and	l parents
and tak	0 0	1	2	3	4	5								
	motes infa Iships, an 0								essme	ent, deve	elopme	nt of tri	usting	
	nonstrate oment in i		Developn				fession	als can d	do to j	promot	e health	ı, langu	age, and	cognitive
	0	1	2	3	4	5								

Alliance for the Advancement of Infant Mental Health 13101 Allen Road Southgate, Michigan 48195 · p 734.785.7700 · allianceaimh.org

	kelihoo						tal competence in facing challenges, resolving crises and s of basic needs and familiar conflict. (Supportive Counseling)
	dler int						y that includes relationship-based therapeutic parentd Relationship-based Therapies & Practices)
28. Promot		ective suj 1	pervisior 2	n. (<i>Reflec</i> 3	tive Supe 4	rvisi 5	on)
	and ma l comm	intains e					ships with a broad range of people including families, colleagues rs, as the individual role requires. (<i>Building & Maintaining</i>
C		1	2	3	4	5	
30. Works			colleagu	ies across	s agencie	s in]	promoting services for infants/toddlers and their families.
()	_	1	2	3	4	5	
31. Provide		ance and	feedbacl	k to novid	ce staff, g	radu	ate students, and other colleagues as requested. (Coaching and
C		1	2	3	4	5	
32. Activelgroups. (C			nd works	coopera	tively wit	th in	teragency teams, planning committees, and ongoing work
()		1	2	3	4	5	
33. Demon		ability to	work co	onstructiv 3	vely to fir 4	nd "v 5	win-win" solutions to conflicts. (Resolving Conflict)
34 Interac	te with	other nr	ofession	alc in a ta	etful and	Lund	derstanding manner. (Empathy & Compassion)
(1	2	3	4	5	terstanding manner. (Empachy & Compussion)
35. Demon						quic	ckly with the objective to eliminate the crisis and restore calm
()	1	2	3	4	5	
systems, ta	king in p-focus	to accou ed work	nt needs,	goals, co	ntext, an	ıd co	ndations to programs, agencies, legislative bodies, and service nstraints to develop policy and procedure that support and/or system improvements and to obtain funding and other
Costarces	-	1	2	3	4	5	
Leading P	eople						
37. Models		nal comm	itment a	nd empa	thy in pro	omo	tion of all aspects of the practice of infant mental health.
(Motivating	,	1	2	3	4	5	
38. Uses in mental hea	ılth prii						n and others' expert knowledge, to promote effective infant cacy)

	ly effe	ctive inf	ant men			reporting employees, and clients in a rang ers, positively contributing human beings	
0		1	2	3	4	5	
Communicat 40. Demonstr 0	rates a	ability aı 1	nd suppo 2	orts othe	rs to activ	ly listen to others and ask questions for cla	arification. (<i>Listening</i>)
41. Demonstr (Speaking)		-				unicate clearly, honestly, sensitively, and o	liplomatically.
0		1	2	3	4	5	
	ks, po	licy mer	noranda	, contrac	ts, article	hers to write clearly, concisely, and with a research, web content, grant applications, ng)	
0		1	2	3	4	5	
43. Effectively 0		itates sr 1	nall grou 2	ıps (eg, i 3	nterdiscij 4	nary or interagency teams). (Group Proce	ss)
	he "bi					ee and explain the interaction of multiple is. (Analyzing Information)	factors & perspectives to
	ective					others to generate new insights and workaged care. (<i>Solving Problems</i>)	ble solutions to issues
	alterr					others to integrate all available informations (Exercising Sound Judgment)	n, consult with others,
47. Demonstr Perspective)		ability ai 1	nd suppo	orts the a	ability of o	ers to consider difficult situations careful	ly. (Maintaining
Ü							
48. Defines, o Organizing)	create	s a sequ	ence for 2	, and pri	oritizes ta 4	ks necessary to perform role and achieve g	goals. (<i>Planning &</i>
Reflection 49. Regularly supervisor or 0	men				ngs, strer 4	ths, and growth areas and discusses issues	and/or concerns with
50. Seeks a hi	igh de	gree of o	congruei 2	nce betw 3	reen self-p 4	rception and the way others perceive him,	/her. (Self-Awareness)
51. Remains 0		upports 1	others t 2	o remain 3	open and	curious. (<i>Curiosity</i>) 5	
(Professional,	/Perso	onal Dev	elopmen	t)		fant/toddler development and infant men	ital health practice.
0		1	2	3	4	5	
53. Uses resu 0		reflection	on to ide 2	ntify are 3	as for per 4	onal development. (Emotional Response)	
				А	Illiance for t	Advancement of Infant Mental Health	

54. Recogni	zes and	d respon 1	ds appro 2	priately (3	to paralle 4	el process. 5	(Parallel Proc	ess)	
	es oppo	ortunitie	s and nee	eds for pr	ogram in	nprovemer	its, expanded :	services, and new	service. (<i>Program</i>
Managemen 0	itj	1	2	3	4	5			
					itive bod	ies, and/or	service system	ns to develop nev	v services and/or achieve
improveme 0	iits. (P	1	2 2	3	4	5			
57. Establish					itcomes i	neasures fo	or continuous	quality improven	nent; feeds information
0	ilcies.	1	2	3	4	5			
58. Assists a					odies, and	d service sy	stems in obtai	ining funding, inc	luding grant development
0	acion.	1	2	3	4	5			
Comments:									
			P	ROFESS	SIONAL	REFERE	NCE RATIN	NT® (IMH-E® NG FORM , COLLEAGUE	
Applican	t's Naı	me							
Your Nar	ne:								
Your Add	lress:	/							
Email ad	dress:								
Daytime	Teleph	none (inc	cluding a	rea code)	:				
Credenti	als/Dis	scipline/	Educatio	n:					
Years of Y			nts, your	ng childre	n, caregi	vers, and fa	milies:		
You are v	which i	n relatio	nship to	applican	t?:				
Reflectiv	e Supe	rvisor/C	onsultan	it Pr	ogram Sı	upervisor	Teacher	Supervisee	Colleague
Briefly de	escribe	e the nati	ure of yo	ur work t	ogether	or your pro	fessional rela	tionship:	

Name and Address of agency or organization where mentoring/supervision/consultation/training took pla
You worked with the applicant from (mo./yr.) to (mo./yr.)
If you are/were applicant's reflective supervisor/consultant, did you meet (circle all that apply) Weekly Biweekly Monthly For a total of hours
Other I hereby recommend do not recommend this applicant for Endorsement®.
The information I have provided on this form is correct to the best of my knowledge and belief.
Signature: Date;