COMPETENCIES
Infant/Early Childhood Mental Health Consultation

Over the last decade, infant/early childhood mental health consultation (I/ECMHC) has emerged as an effective evidence based strategy to promote young children's positive social emotional development and to prevent, identify, and reduce the impact of mental health problems among young children and their families.

Increasingly states, communities and programs have adopted I/ECMHC in early care and education settings as well as in other settings typically frequented by young children and their families (i.e., pediatric offices, homeless shelters, etc.). Despite the growing body of evidence supporting I/ECMHC and its increasing prevalence there are no nationally recognized standards or competencies for I/ECMH consultants. Several states and regions have a long history of successfully implementing I/ECMHC and have developed their own guidelines related to training, education, and qualifications based on their unique programs.

A number of developers of I/ECMHC programs and researchers from across the country (RAINE: Advancing Early Childhood Mental Health Consultation Practice, Policy and Research) have met as a group to reach consensus on the definition of I/ECMHC, practice principles, as well as relational elements of I/ECMHC (i.e., "the consultative stance") over the last several years. Capitalizing on the many years of consensus building of the RAINE Group, Georgetown University's Center for Child and Human Development (GUCCHD) has facilitated a process to develop this initial set of competencies for I/ECMHC. Connecticut's Early Childhood Consultation Partnership (ECCP) generously shared their program's competencies as a strong example of a state-wide I/ECMHC program's competencies. (www.eccpct.com/Program/Workforce). National experts from the Southwest Human Development, Harris Infant and Early Childhood Mental Health Training Institute (Phoenix, AZ); Infant-Parent Program University of California, San Francisco; and the Kids Connects program developed in Boulder, CO also shared their programs' training materials to ensure these emerging national competencies aligned with programs with a long-standing history of providing effective I/ECMHC. Experts on I/ECMHC from around the country contributed to and reviewed these competencies (see list of contributors below).

These I/ECMHC competencies developed by GUCCHD faculty and colleagues are the first step towards building a national consensus on the array of foundational skills, knowledge, and abilities needed to be a competent I/ECMH consultant. They are not meant to replace competencies that have been developed by local or state I/ECMHC programs. They can be used to supplement, extend, or guide existing or new efforts at building a qualified I/ECMHC workforce.

These I/ECMHC competencies can be used to further distinguish I/ECMHC from the guidelines that have been developed for interdisciplinary fields such as infant mental health or other consultation for young children and families. Many states have adopted guidelines for infant mental health practitioners (www.zerotothree.org/public-policy/pdf/infant-mental-health-report.pdf). Consultation competencies have also been developed by the Administration for Children and Families (*A Guide to Effective Consultation with Settings Serving Infants, Toddlers, and Their Families: Core Knowledge,*

Competencies, and Dispositions, 2011, www.acf.hhs.gov/programs/occ/resource/effective-consultation). These newly developed I/ECMHC competencies should be viewed as additional competencies or rather a specialization of infant mental health and consultation competencies.

These I/ECMHC competencies can assist to:
- Influence hiring, supervising, and evaluating I/ECMHC consultants,
- Guide professional development, training, and coursework, and
- Lead to enhanced quality of I/ECMH consultants and increased professional credibility.

Ultimately, through refinements over time these competencies may be used to create increased clarity in the field resulting in enhanced or new financing mechanisms to support I/ECMHC in a variety of settings serving young children and their families.

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Resources Related to Infant Mental Health Competencies
Infant, Toddler, and Early Childhood Mental Health Competencies: A Comparison of Systems: www.zerotothree.org/public-policy/pdf/infant-mental-health-report.pdf

Infant, Toddler, and ECMHC Competencies: A Comparison of Systems Webinar–ZERO TO THREE Webinar, June 2014: www.zerotothree.org/public-policy/state-community-policy/i-ecmh-competencies-webinar-ppt.pdf

Infant, Toddler, and ECMHC Competencies: A Comparison of Systems Webinar–Questions from Participants: www.zerotothree.org/public-policy/webinars-conference-calls/i-ecmh-competencies-webinar-q-and-a.pdf

Resources Related to Consultation Competencies for Infants, Toddlers and Their Families (not specific to mental health)
A Guide to Effective Consultation with Settings Serving Infants, Toddlers, and their Families: www.acf.hhs.gov/programs/occ/resource/effective-consultation

Additional Links to Infant Mental Health State Affiliates
World Association for Infant Mental Health: www.waimh.org

Knowledge Area

	DESCRIPTION
Role of the I/ECMHC	Describes how Infant/Early Childhood Mental Health Consultation (I/ECMHC) is a mental health specialization that is distinct from other activities in which mental health professionals may engage (e.g., treatment, diagnosis, and training). Demonstrates an ability to strengthen families', early care and education professionals', (including home visitors') capacities to support the mental health of all children and families in a setting, prevent mental health problems from developing or increasing in intensity; and respond effectively to mental health concerns.
Foundational Knowledge	Draws from a large body of knowledge to understand children, families, and staff and how they relate to each other. Draws from a variety of disciplines and theories to inform decisions and directions of consultation.
Culture	Describes how cultural beliefs, values, attitudes, experiences, and biases shape relationships, behaviors and influences settings and communities in important and meaningful ways.
Reflective Practice	Thinks about and questions one's influences and actions before, during or after consultation interactions. Considers the perspective and experiences of others (e.g., child/family/staff) in the context of consultation, "What must this experience have been like for the child…staff…parent?"
Child and Family Consultation	Collaborates with families, staff and other caregivers to understand and respond effectively to a child's mental health needs. Assists caregivers and home visitors to understand and effectively respond to the mental health needs of a family. Consults with families, staff, and other caregivers about a particular child or family.
Classroom/Home Consultation	Collaborates with parents and staff to assess relationships, routines, and practices that impact the classroom or home climate.
Programmatic Consultation	Assesses a program's structures, policies, procedures, professional development opportunities, philosophy, mission and practices as they relate to supporting the mental health of young children and their families.
Systems	Connects and integrates I/ECMHC to various systems that serve child and family serving systems. Contributes to the development of new consultation programs and/or to support consultation programs to expand to serve more children and families.

Knowledge Area

CATEGORIES

Role of the I/ECMHC
- Distinguishes I/ECMHC from Other Related Professions
- Natural Setting
- Consultative Process
- Consultative Stance and Reflective Practice
- Supervision
- Ethics
- Positive and Collaborative Relationships with Other Agencies

Foundational Knowledge
- Multidisciplinary Body of Knowledge
- Development and Influences on Development
- Culture
- Self-Awareness/Reflective Practice
- Understanding Families, Other Caregivers, and Systems

Culture
- Values Diversity and Works Effectively Across Cultures and Family Structures
- Self-awareness
- Promotes Cultural Responsiveness (Practices, Policies, and Procedures)

Reflective Practice
For Consultants
- Uses Self-reflection to Enhance Consultation
- Assists Others to Reflect

For Consultants Providing Reflective Supervision
Reflective Supervision (When an I/ECMH consultant is also providing reflective supervision to others)
- Values Reflective Supervision
- Self-Awareness as a Supervisor
- Supervision Skills
- Promotes Reflection in the Supervisee

Child and Family Consultation
- Works Collaboratively to Understand the Meaning of Behavior and Develop Hypotheses
- Promotes Trusting Respectful Relationships with Families, Other Caregivers and Staff
- Community Collaboration
- Develops Plans and Supports Implementation

Classroom/Home Consultation
- Promotes Understanding of the Importance of Early Relationships and Fosters Caregivers' Capacity to Promote Positive Relationships (e.g., positive adult-child relationships; peer relationships; staff and family relationships; staff relationships with each other; staff relationships with administration)

Programmatic Consultation
- Program Design and Infrastructure
- Program Wide Approaches to Supporting Mental Health of Children and Families
- Group Facilitation
- Plan for Mental Health Support in Crisis or Disasters

Systems
- Bridging Services to Promote Cohesion for Young Children and Families
- Advocacy
- Building an IECMHC Program or Expanding an IECMHC Program

Role of the I/ECMHC

Describes how Infant/Early Childhood Mental Health Consultation (I/ECMHC) is a mental health specialization that is distinct from other activities in which mental health professionals may engage (e.g., assessment, treatment, training). Demonstrates an ability to strengthen families', early care professionals', and home visitors' capacities to support the mental health of all children and families in a setting, prevent mental health problems from developing or increasing in intensity; and reducing mental health concerns.

CATEGORY	CORE SKILLS
Distinguishes I/ECMHC from Other Related Professions	Demonstrates an understanding of IECMHC as building the mental health capacities of families, teachers and others who care for young children (i.e., an indirect, preventative service as opposed to the prevision of direct mental health treatment).
	Describes the distinction between the role of the mental health consultant and other professionals who support the development of staff and family caregiver capacities (e.g., professional development coaches, health service managers, health care consultants, home visitors, early interventionists, disability coordinators) Clarifies that I/ECMCHC focuses on promoting mental health/social emotional development using a mental health knowledge base (see foundational knowledge section of theses competencies below)to inform decisions and directions of consultation.
Natural Setting	Demonstrates comfort working in natural settings including homes and early care and education environments.
	Is able to articulate a consultation philosophy, model, or approach that is consistent with the employing agency/institution.
Consultative Process	Demonstrates an organized approach to the stages of the consultative process (e.g., entering the new environment, establishing mutual expectations for the work, gathering information and perspectives of all those involved (including the child), facilitating the establishment of goals, supporting and assessing progress, righting the course of the consultation when necessary, transitioning and ending).
	Demonstrates an ability to support the mental health of infants, young children and the adults who care for them.
	Recognizes when additional mental health services are warranted and is able to make appropriate and effective referrals across multiple systems.
	Keeps accurate records, appropriate documentation, and data collection in accordance with the program or setting requirements.
Consultative Stance and Reflective Practice	Able to articulate the elements of the "consultative stance." (As described by Johnston & Brinamen, 2006)
	Demonstrates the ability to use oneself in flexible and different ways based on the unique needs of the setting, context and relationships (e.g., an observer, a listener, a facilitator, a problem solver, and educator).
	Supports staff to reflect on their disciplinary (e.g., psychology, social work, counseling) scope of practice including recognizing and maintaining appropriate boundaries and roles.
Supervision	Actively participates in regularly scheduled administrative and reflective supervision that is marked by an atmosphere of reflection and collaboration.
	Participates in regular administrative supervision that includes discussion of documentation, data collection, case consultation, etc.

Role of the I/ECMHC

CATEGORY	CORE SKILLS
Ethics	Adheres to the ethics and standards of professional conduct (e.g., National Association of Social Workers, NASW code of ethics), and if licensed, adheres to the requirements for maintenance of licensure.
	Routinely discusses confidentiality and the limits of confidentiality with staff and families at the start of services and revisits these topics during the course of the work, as circumstances indicate.
	Carries out the mandate to report suspected child abuse and neglect and supports others in their responsibilities as a mandated reporters.
	Seeks continuing education experiences to enhance knowledge and skills, and stays apprised of new research, scholarship and evolving notions of best practices in I/ECMHC.
Positive and Collaborative Relationships with Other Agencies	Establishes and maintains partnerships with relevant child and family serving agencies within the community (i.e., Early Head Start, Head Start, child care, family support, early intervention, mental health treatment, child welfare, etc.) in order to collaborate on behalf of children and families.

Foundational Knowledge

Draws from a large body of knowledge to understand children, families, and staff and how the relate to each other. Draws from a variety of disciplines and theories to inform decisions and directions of consultation.

CATEGORY	CORE KNOWLEDGE
Multidisciplinary Body of Knowledge	Understands and embraces multidisciplinary approaches for working with young children, families, and other caregivers and staff, drawing on fields of professional consultation, psychology, social work, health behavior, early education, infant and early childhood mental health, family/systems, etc.
	Understands that a child's physical environment, attachment, social relationships, life circumstances (e.g., poverty, domestic violence) temperament, and developmental capacities all impact behavior and social emotional health. Uses this knowledge to support change in one or more of these realms to improve child outcomes.
	Understands mental health concepts and psychological processes (e.g., parallel process, experiences from a caregiver's past and present can distort how a child's behavior is interpreted, trauma) related to adults.
	Has a broad knowledge base of social emotional curricula, screeners, best practice strategies and frameworks and resources.
	Understands adult learning theory as it relates to families and staff; i.e., concepts related to how adults learn best including strategies such as: ensures learning is relevant, self-directed, collaborative, matched to the learners style of learning, etc.

Foundational Knowledge

CATEGORY	CORE KNOWLEDGE
Development and Influences on Development	Understands the importance of the development of self-regulation (gain control of bodily functions, manage strong emotions, maintain focus) social relationships, communication and representational thinking (an object can represent something), and executive function abilities (remember information, sustain or shift attention, resist impulsive actions or responses) for school readiness.
	Understands the interplay of genes and experiences on development (that the child and the environment (e.g., parents, other caregivers, and risk and protective factors) play a role in determining the course of development).
	Understands how young children form attachment relationships with important family and other caregivers and understands its critical importance in child development.
	Understands typical and atypical growth and development of young children, including the general sequence of developmental milestones in all domains, including cognitive, sensory-motor, communication, play, self-regulatory and social-emotional.
	Understands the role of peer and group interactions and can use a range of strategies for promoting optimal interactions.
	Understands the role of temperament in child development and supports families and other caregivers to tailor strategies to match the child's temperament.
	Understands the potential negative impact of multiple separations, relational disruptions and loss on early development.
	Understands the potential negative impact of trauma including interpersonal and community violence on both adults and children.
	Understands the potential negative impact of parental depression on child development.
	Understands the influence of, and interaction between, risk factors and protective factors on child behavior and development, family and provider functioning.
Culture	Understands the role and influence of power, inequity, and oppression as it relates to adult and child behavior and relationships.
	Understands cultural variation in development, childrearing practices, and caregiver expectations.
	Recognizes the biological, psychological, and social context of culture and its influence on the values, beliefs, child rearing practices, child development, and social-emotional health and well-being.
Self-Awareness/ Reflective Practice	Understands the value of examining one's own values, beliefs, assumptions, biases and experiences to ensure one does not impose judgements based on one's own values.
	Is able to assist others to examine their own values, beliefs, assumptions, and experiences to assist them in regulating their emotions and reactions to children's behavior.
	Seeks to understand the perspectives and experiences of others in the context of consultation.
	Understands and values reflective supervision as a critical component to effective consultation.

Foundational Knowledge

CATEGORY	CORE KNOWLEDGE
Understanding Families, Other Caregivers, and Systems	Understands that child development occurs within relationships. Pursues an understanding of the quality of the relationships between children and the adults who care for and teach them, and directs consultation to support and enhance those relationships.
	Understands family dynamics and systems theory (how each individual relates to the healthy functioning of the organization, group or family. Understands how members of families and groups are connected to each other through complex relationships).
	Understands the importance of identifying and linking families and staff to appropriate community supports and services as warranted.
	Recognizes the importance of support networks, particularly for isolated families.
	Understands that the relationship between the I/ECMH Consultant and the staff/caregiver impacts the relationship with the staff/caregiver and the child/family.
	Understands that the quality of relationships among adults (between-staff and between staff and the - family) influences children's experience in the classroom.
	Understands the importance of self-care and offers information to families and staff on the connection between self-care and the ability to build successful relationships with families and colleagues.
	Understands the program's system for screening and assessment to identify young children exhibiting concerns in the social and emotional domains.
	Understands programmatic problems in context of larger systems e.g., funding sources, program requirements, program culture, leadership, etc.
	Understands one's own role and the role of consultation in the various systems including local/regional systems and larger state or national systems.

Culture

Describes and demonstrates how culture (beliefs, values, attitudes, biases and experiences) shapes relationships and behaviors and influences settings and communities in important and meaningful ways.

CATEGORY	CORE SKILLS
Values Diversity and Works Effectively Across Cultures and Family Structures	Is able to describe how culture (beliefs, values, attitudes and experiences) shapes relationships and behaviors in important and meaningful ways.
	Is able to define cultural and linguistic competence and is able to describe its relevance to I/ECMHC.
	Is able to describe cultural context as a potential source of resilience.
	Demonstrates an appreciation of and respect for the unique values and beliefs of each family and family structure.
	Values and adapts to the diverse cultural contexts of the programs and communities served.
	Demonstrates the ability to explore and negotiate cultural differences.
	Works effectively with individuals, groups, organizations, and systems that vary in culture, perspective, and priorities.

Culture

CATEGORY	CORE SKILLS
Self-awareness	Explores one's own preparation, background, knowledge, skills, and attributes that will enhance the effectiveness of consultation in diverse communities.
	Demonstrates the capacity for self-awareness recognizing how one's own culture and experiences shape her personal and professional world view, including perceptions and expectations of herself, others, and interactions.
Promotes Cultural Responsiveness (Practices, Policies, and Procedures)	Support staff to speak with families in their preferred language and to use culturally responsive professional interpreters when this is not possible.
	Works with programs to promote cultural competence (i.e., language and culture are respected, materials provided to families are culturally and linguistically appropriate, and training to increase cultural responsiveness is provided to staff).
	Supports the capacity of others to work cross-culturally to positively influence policymaking, administration, practice, and service delivery and systematically involve families, key stakeholders, and communities.

Reflective Practice

Thinks about and questions one's influences and actions before, during or after consultation interactions. Considers the perspective and experiences of others (e.g., child/family/staff) in the context of consultation, i.e., "What must this experience have been like for the child…staff…parent?"

CATEGORY	CORE SKILLS
FOR CONSULTANTS	
Uses Self-reflection to Enhance Consultation	Is able to describe the importance and benefits of reflective practice.
	Regularly reflects on one's own values, beliefs and assumptions as they influence interactions, relationships and directions for consultation.
	Uses reflection regularly to enhance and improve the quality of one's work by thinking about one's behavior and thoughts before, during and after interactions with families and other caregivers/professionals.
	Uses observations to explore the meaning of behavior and the quality of the relationships in a child and family's life.
	Explores a wide variety of possible approaches to work with staff, families and children— understands there is no one correct strategy nor any quick fixes.
	Explores the climate of the setting with staff and families and how the setting's unique climate contributes to or hinders the promotion of mental health in children and families.

Reflective Practice

CATEGORY	CORE SKILLS
Assists Others to Reflect	Assists staff and families to reflect on their "hot button" issues (i.e., what behaviors or experiences really stir up feelings or reactions) to assist staff and families in responding to children's behaviors appropriately.
	Supports families and staff to understand how their own values, beliefs, experiences, feelings and settings influence children's behavior.
	Uses listening, patience, and reflection to encourage others to explore solutions and directions for approaching challenges.
	Collaborates with others to explore self-care, life balance, stress reduction, and the capacity to regulate their own emotions.
	Is able to provide individual and group opportunities for staff to engage in critical reflections on personal values, experiences, ethics, and biases when working within a supportive role with families.
	Assists others to reflect on the strengths and limitations of the setting (i.e., agency, classroom, program, home, etc.) and explore how the setting impacts possibilities and approaches to supporting children, families and staff.
FOR CONSULTANTS PROVIDING REFLECTIVE SUPERVISION **Reflective Supervision** (When an I/ECMH consultant is also providing reflective supervision to others)	
Values Reflective Supervision	Able to describe and define goals and benefits of reflective supervision.
Self-Awareness as a Supervisor	Develops self-knowledge and models reflective practice by recognizing the strengths and limitations of one's personal supervisory style
Supervision Skills	Develops a trusting and secure relationship with supervisees.
	Creates a climate where both the child or family and the staff's needs are being considered so that the effectiveness of the intervention is optimized. (Shahmoon-Shanok, 2009, 8).
	Develops a collaborative partnership where the supervisee never feels alone, is not overwhelmed by fear or uncertainty, and feels safe to express: fears, uncertainties, thoughts, feelings and reactions (Shahmoon-Shanok, 2009, 8).
	Develops a collaborative relationship designed to support professional growth that improves program quality and practice by cherishing strengths and partnering around vulnerabilities (Shahmoon-Shanok, 2009, 8).
	Demonstrates an ability to help supervisees cultivate reflective practice in others i.e., with home visitors, ECE professionals and families e.g., asks questions to prompt reflective thinking in others.
	Remains emotionally present, focusing on the emotions evoked in the work and the supervisee's reactions.
Promotes Reflection in the Supervisee	Assist supervisees to explore their own thoughts and feelings elicited from interactions and how they influence behavior how their thoughts and feelings influence their behavior.
	Explores the parallel process with supervisees (ability to pay attention to all the relationships and how they influence each other (i.e., between the supervisor and practitioner; the practitioner and parent; the parent and child; etc.).

Child and Family

Collaborates with families and caregivers and staff to understand and respond effectively to a child's mental health needs. Assists caregivers to understand and effectively respond to the mental health needs of a family. Consults to families, other caregivers and staff about a particular child or family.

CATEGORY	CORE SKILLS
Works Collaboratively to Understand the Meaning of Behavior and Develop Hypotheses	Develops a comprehensive understanding of child and family behavior by including information from families and other caregivers, observations, and documentation (i.e., health records, anecdotal notes, assessment, etc. inclusive of development, health, physical, social, emotional, psychological family history and culture).
	Gathers family information in a manner that is non-threatening, respectful, collaborative and supportive. (Southwest Human Development)
	Considers the influence of medical and developmental issues that may impact behavior
	Uses a variety of observation strategies, tools, and recording techniques (e.g., video) in order to gain insight into a child's behavior and the relational influences on their functioning. (Adapted from Early Childhood Consultation Partnership (ECCP))
	Demonstrates an ability to assess the relationships and interactions between caregivers, staff, family and the child and how they impact child and family well-being.
	Demonstrates an ability to honor parental expertise and assists others to value and support the parent-child relationship as the child's first and primary relationship in a child's life.
	Assists families and staff to understand all of the influences on their view of the child (i.e., culture, history, trauma, programmatic, bureaucratic, and interpersonal). (Johnston & Brinamen 2006, Consultative Stance)
	Assist families and other caregivers with accurate interpretations of children's behavior and the social emotional or physical needs that may be prompting the behavior.
	Works with others to facilitate any appropriate referrals needed i.e., medical, developmental, family counseling, etc.
Promotes Trusting Respectful Relationships with Families, Other Caregivers and Staff	Facilitates understanding, mutual respect and direct communication between families and early childhood professionals, and among early childhood professionals, on behalf of the child.
	Assists staff to develop trusting respectful relationships with families.
	Able to engage caregivers, staff and families in thinking about and understanding the meaning of a child's behavior/presentation.
	Collaborates with families and other caregivers to develop a working hypothesis about the meaning of a child's behavior.
	Maintains flexibility in thinking that allows for revision of hypotheses about the child and his/her relationships. (Southwest Human Development)
Community Collaboration	Identifies and facilitates appropriate referrals for specific children and families (i.e., referrals that meet the diverse needs of families with consideration given to resources, culture and language).
	Exhibits positive relationships with other professionals and agencies within the community, region or state in order to make appropriate referrals and coordinate services for children and families.

Child and Family

CATEGORY	CORE SKILLS
Develops Plans and Supports Implementation	Integrates information and collaboratively develops a plan with early childhood professionals and families that addresses a child's (and family and staff) needs in a culturally sensitive manner considering the context and available resources.
	Assists families and other caregivers to implement developmentally appropriate, evidence-based and best practice interventions for children with mental health, relational and/or developmental challenges.
	Works in collaboration with other service providers to support families and staff (e.g., Part C, quality improvement, etc.).
	Assists early care and education professionals and home visitors to implement evidence based and best practice interventions with families.

Classroom/Home

Explores how the classroom supports all childrens' social emotional development. Collaborates with parents and caregivers to assess relationships, routines, and practices that impact the classroom or home climate.

CATEGORY	CORE SKILLS
Promotes Understanding of the Importance of Early Relationships and Fosters Caregivers' Capacity to Promote Positive Relationships (e.g., positive adult-child relationships; peer relationships; staff and family relationships; staff relationships with each other; staff relationships with administration)	Supports staff and families to understand how the quality of adult relationships impacts the way children learn how to get along with others.
	Assists programs to select and/or implement a variety of basic observation strategies, tools, assessments, and recording techniques in order to gain insight into the functioning and mental health climate of the classroom or home. (Adapted from ECCP)
	Understands the role of peer and group interactions and offers a range of strategies based on understanding the consultant's role in promoting optimal interactions.
	Demonstrates an ability to encourage families and caregivers to foster positive peer interactions.
	Fosters families and staff capacities to promote the development of children's self-regulation, communication skills, attentional skills, persistence and other social emotional skills.
	Shares information about how young children learn and develop in a way that caregivers, staff, and families can use and understand.
	Demonstrates the ability to promote caregivers, staff and families belief in the value of their relationships with children and helps them to use interactions to scaffold development.
	Helps staff and families to integrate activities and resources that infuse mental health principles into the daily routines and interactions of the home or classroom. (Adapted from ECCP)
	Demonstrates an ability to help families, staff, and other caregivers initiate and/or modify routines to promote safety and consistency. Encourages routines and practices that are developmentally appropriate and responsive to the needs of individual children as well as the group.
	Supports staff to implement effective classroom-wide practices and strategies that promote the social and emotional development of all children in the setting.
	Supports families, staff, and other caregivers to implement routines and strategies in the home that promote children's social emotional development.

Program

Assesses a program's systems, policies, procedures, professional development, philosophy and mission as they relate to supporting mental health of young children and their families.

CATEGORY	CORE SKILLS
Program Design and Infrastructure	Forms mutually respectful collaborative relationships with all staff including program directors and leadership.
	Shares information to promote program design elements that support positive social emotional development of young children (e.g., continuity of care, low child/caregiver ratios, staff access to support when needed, appropriate case load for home visitors, focus in home visiting on the parent-child relationship, reflective supervision, etc.).
	Identifies factors (e.g., program policies, program climate, staff wellness, human resource policies, leadership practices) influencing program quality and collaboratively addresses impediments to improvement.
	Explores and addresses program infrastructure elements that promote a positive mental health climate, for example, encourages interviewing practices that promote the hiring of staff that have the capacity to build positive relationships with children and families, promotes professional development activities that support staff's understanding of children's emotions and behaviors, encourages staff wellness activities (stress reduction strategies, health promotion, etc.).
	Assists program leadership in recognizing and supporting staff needs as a contributor to enhanced program quality.
	Evaluate the effectiveness of program level intervention strategies and revises approach in response to consultee(s) feedback and observable changes in practice, policy and/or interactions.
	Elicits and explores multiple perspectives in understanding concerns within a program. (Johnston and Brinamen, 2006, Consultative Stance)
	Represents the perspective of consultees to others across all levels of the intuitional hierarchy. (Johnston and Brinamen, 2006, Consultative Stance)
	Encourages the development of direct and clear lines of communication between staff members. (Adapted from ECCP)
	Demonstrates the ability to intervene in relational difficulties negatively impacting the mental health climate.
	Coordinates with, and among, other external quality enhancement and internal program resources (e.g., instructional coaches, training and technical assistance efforts, program leadership, etc.) in such a way as to maximize staff efficacy. (ECCP)
Program Wide Approaches to Supporting Mental Health of Children and Families	Shares information about selecting and effectively using various social emotional curricula and approaches throughout a program.
	Adapts and flexibly draws from curricula to collaboratively contribute ideas in keeping with a specific program's philosophy, needs and culture.
Group Facilitation	Engages and facilitates groups i.e., family/parent groups, staff groups, program stakeholders.
Plan for Mental Health Support in Crisis or Disasters	Facilitates or links program to resources in developing and implementing a support plan in preparation for a disaster or crisis.

Systems

Connects and integrates various child and family serving systems. Contributes to the development of new consultation programs and/or to support consultation programs to expand to serve more children and families.

CATEGORY	CORE SKILLS
Bridging Services to Promote Cohesion for Young Children and Families	Demonstrates awareness and sensitivity towards existing attitudes and strengths of community members (e.g., community leaders, community agencies, service providers, etc.).
	Identifies local and state community partners and seeks to participate in community and state level collaborations to support social emotional systems enhancement.
	Ability to work within and across systems, integrating MH concepts and supports into the cultures and environments where young children are.
	Participates as appropriate as an active participant in regular community meetings (i.e., School Readiness council, Policy Council, Head Start board, Directors' forums, etc.) and state level initiatives.
	Encourages networking between early childhood educational centers, home visiting programs, and other child and family serving organizations within the community.
	Establishes relationships with other professionals in other early childhood and mental health disciplines, including counseling and treatment services and multidisciplinary consultation.
	Effectively uses and shares current information about standards (i.e., professional standards, program standards, licensing standards) resources; and other child and family serving systems. (Adapted from ECCP)
	Determines the type and amount of information shared during collaborative meetings by recognizing the meeting's purpose, and then responsibly presents related information in a sensitive manner that is respectful of those involved.
	Performs outreach and engagement activities representing her ECMHC program and through this strengthens community connections and maintains a consistent referral base.
Advocacy	Demonstrates an ability to serve as an effective advocate for I/ECMHC at a local, regional or state level.
	Supports advocacy efforts at state and community levels on behalf of young children, their families, early childhood professionals and systems within which they exist.
Building an IECMHC Program or Expanding an IECMHC Program	Able to explore issues related to: hiring and training a qualified IECMHC workforce, defining the specific IECMHC model that will be implemented, determining how IECMHC services will be monitored and evaluated, how the service will be financed, and how the IECMHC will be sustained over time.