



Alliance for the Advancement of  
Infant Mental Health

## **Endorsement<sup>®</sup> Examination Tip Sheets**

**Are you thinking about taking the Endorsement<sup>®</sup> Exam or coaching an Endorsement<sup>®</sup> examinee? Please read these important considerations about the use of the tip sheets.**

The *Endorsement<sup>®</sup> Examination Tip Sheets* were developed as an interactive tool. There are two tip sheets, one for the examinee, *Tip Sheet for Working with an Endorsement<sup>®</sup> Examination Coach* and one for the Endorsement<sup>®</sup> Exam coach, *Tip Sheet for Endorsement<sup>®</sup> Examination Coaches*. They are designed to support relationship-based work between examinees and coaches that can strengthen levels of confidence during the preparation period leading to the day of the Exam.

The decision to sit for the Endorsement<sup>®</sup> Exam is a very important professional step. Because it's such a significant decision, many people find the preparation period stressful, therefore finding it very helpful to ask a trusted colleague, supervisor, or consultant who is endorsed as an Infant/Early Childhood Mental Health Specialist or Infant/Early Childhood Mental Health Mentor to provide some focused support, i.e., to listen as areas of strengths and vulnerabilities are acknowledged, to offer guidance for further independent study, and to provide meaningful encouragement as progress is made.

Thus, the tip sheets are a concrete tool to be used *within* a relationship, one that invites reflection and conveys trust. While the examinee and coach may decide to meet once, twice, or several times, the steadiness of authentic support can make a very significant difference in assisting the examinee in reducing stumbling blocks to self-confidence, overcoming challenges to success, and ultimately completing desired Endorsement<sup>®</sup> goals.

We gratefully acknowledge the members of the MI-AIMH Endorsement Committee who worked on this document. With special appreciation and thanks to our colleague, Karol Wilson.

## Tip Sheet for Working with an Endorsement® Examination Coach

### **BEFORE YOU BEGIN:**

1. Read this entire tip sheet
2. Identify someone you feel comfortable working with throughout the coaching process; someone with whom you can share both your goals and your worries. This may be a provider of reflective supervision/consultation (RSC), program supervisor, colleague or other 0 – 3 provider (IMH-E®) or 3 – 6 provider (ECMH-E®). The person you identify should have earned Endorsement® as an Infant/Early Childhood Mental Health Specialist or Infant/Early Childhood Mental Health Mentor
3. Let the person you choose know why you chose them. If you have any concerns about how the coaching session(s) will go, talk about your concerns and your hopes, before agreeing to work together, and before beginning the preparation work. This will help both of you clarify your roles and move forward with confidence that you are – indeed – on the same track and headed for a successful finish!

NOTE: Prepare for your coaching session(s) by writing out responses to vignette questions, key terms, concepts, strategies, and contextual considerations as outlined in Step One and Step Two below. This will help you to organize your thoughts *before meeting with your coach*. When you meet with your coach, you will share your written work with them.

### **STEP ONE:**

Read a selection of resources from the *Endorsement Examination Preparation Resource List*<sup>1</sup>. This preparation will serve to sharpen your knowledge base and strengthen contextual consideration of:

- Developmental norms of infant, toddler, young child, and family relationship development, keeping executive functioning in mind
- Key terms and concepts, including:
  - attachment
  - internal working model
  - reflective functioning/capacity
  - culture
  - typical development 0 – 3 (IMH-E®)
  - typical development 0 up to 6 years (ECMH-E®)
  - brain development
  - formal and informal assessment
- Infant-early childhood mental health (IECMH) strategies (developmental guidance, supportive counseling, advocacy, infant/child parent psychotherapy, emotional support, material needs, concrete assistance, etc.)
  - Put your understanding of IECMH practice into words by:
    - using examples from your own cases to describe each strategy
    - remembering that, since we are always observing and assessing, it is essential to first observe, then assess, and to be aware of distinguishing one from the other

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<sup>1</sup> This document is emailed to Endorsement® applicants at the time of registration and submission. Please contact [Endorsement@infancyonward.org](mailto:Endorsement@infancyonward.org) if you need access to this document

- considering that conscious awareness of your own culture (as well as the culture of those with whom you are working) impacts every aspect of your work
  - considering and wondering about cultural differences and similarities from your own cases, between all those involved (including yourself as the services provider)
- RSC relationships
  - Put your understanding of RSC into words by:
    - describing RSC
    - stating why you think RSC is required for all who are providing services to infants, toddlers, young children, and their families?
    - stating what you believe to be the primary roles of the supervisee/consultee and the supervisor/consultant?
    - stating how you believe that RSC assists both the supervisee/consultee and the supervisor/consultant?

## STEP TWO:

*\*\*It should be noted that Step Two gives guidance around how to respond to the clinical vignettes, for IMHS/ECMHS and IMHM-C/ECMHM-C examinees. Step Two does not apply to Policy or Research/Faculty examinees.*

Work with a sample vignette(s)<sup>2</sup> and write your responses to the following:

- FIRST: Identify the IECMH strategies to be utilized within the vignette
- SECOND: Identify and consider the status of each participant within the vignette
- THIRD: Put yourself into the vignette and identify your feelings, not your assessments and/or service plans
- FOURTH: Consider: Who do you resonate with? Why? Who makes you uncomfortable, worried, or even scared? What's your initial response to those feelings?

THEN, write responses:

- The vignette(s) provides illustrations of IECMH theories and constructs. Similarly, the questions are based on IECMH theories and constructs. It is important to respond to the vignette, not to the "textbook" origin of the theory or construct. Practice writing responses to any of these types of questions:
  - What did you find yourself wondering about?
  - How would you engage the caregiver(s)?
  - What do you know?

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<sup>2</sup> Sample vignettes may come from your own work in the form a case study; may be created by your Exam coach; may be a vignette you received at a training or conference; or may come from the book "Case Studies in Infant Mental Health: Risk, Resiliency, and Relationships" Joan J. Shirilla &. Deborah J. Weatherston, Editors.

- What would you like to learn more about? How would you go about learning those things?
  - What did you notice going on inside your body as you read the vignette? How does this inform your understanding of the family and/or yourself?
  - What would you need from your reflective supervisor/consultant if you were this practitioner?
  - How does the caregiver's history pose challenges to the relationship?
  - In this vignette, how would you address issues of race, culture, and ethnicity?
  - What safety considerations do you need to keep in mind for this vignette?
  - Where does the hopefulness lie?
- Practice time-saving succinctness by re-reading and then shortening your responses, i.e. saying the same things with fewer words

### **STEP THREE:**

Set up a time to meet with your coach. Allow 1-2 hours for this session. It will be helpful to give copies of all written preparation work to your coach before this meeting. Remember that your coach's central role is to support you as you prepare to successfully complete the Endorsement® exam.

### **STRAIGHT TALK FOR YOU AND YOUR COACH THAT CAN BE VERY HELPFUL:**

- Prepare for the Exam in such a way that allows you to feel confident to show the Exam reviewers that you are "ready," i.e. think, consider, and respond according to "best practice," (this is particularly useful when there are circumstances within the vignettes that aren't following what you know to be 'best practice')
- Practice focusing on 'Who needs what?' when you reply to the Exam vignettes
- Think about what you would want if you were the parent/caregiver in the Exam vignettes
- Think about what you would like to offer the parent/caregiver in the Exam vignettes so that the infant/toddler/young child's needs can be met. This will enable you to put more of YOURSELF into your response
- Think about what you would want if you were the supervisee/consultee in the Exam vignettes (IMHM-C/ECMHM-C only)

### **ADDITIONAL QUESTIONS THAT WILL HELP YOU AND YOUR COACH ASSESS YOUR ENDORSEMENT® EXAM READINESS:**

How will you and your coach assess your level of expertise in the following:

- Ability to assist family in setting goals for infants, toddlers, young children, parents/caregivers, and relationship well-being
- Being able to talk about what you've learned about infants, toddlers, young children, and families as you've carried out your professional work thus far
- Feeling clear about the role for which you're seeking Endorsement® as you take the Exam

- Recognizing the impact that racial, ethnic, and cultural identities and experiences have on all relationships, and being able to explore the significance of cultural differences in relationship development, particularly between interventionists and families, and between supervisors and supervisees
- Recognizing the impact of trauma on development, health and well-being, and relationships, including experiences of domestic violence, history of abuse/neglect, and experiences of loss/grief
- Recognizing the impact of poverty on all individuals and their relationships, including parent/caregiver-infant/toddler/young child
- Recognizing that complex stresses on parents/caregivers can result in losing sight of the importance of the infant/toddler/young child. **The infant/toddler/young child's needs are at the center of all IECMH intervention, and must not be forgotten or obscured, however chaotic that family's circumstances may be**
- Reflecting on the range of your case experience with 0 – 3 year olds (IMH-E®) and [3 up to 6 year olds \(ECMH-E®\)](#) and their families, do you both feel it has been sufficient in preparing for the Exam?

#### **SUGGESTIONS FOR STRENGTHENING YOUR EXAM-TAKING READINESS:**

- Make time to read one article each month specific to IECMH, e.g., *ZERO TO THREE Journal* or *Infant Mental Health Journal*. If possible, find someone to also read the articles, and plan to discuss: “What resonated with you?”
- As often as possible, include case videos in your case presentations/discussions
- Read *What to Know About the Endorsement Exam?*<sup>3</sup>

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## Tip Sheet for Endorsement® Examination Coaches

An Endorsement® Examination coach should have earned Endorsement® as an Infant/Early Childhood Mental Health Specialist (IMHS/ECMHS) or Infant/Early Childhood Mental Health Mentor (IMHM/ECMHM). You may be a program supervisor, provider of reflective supervision/consultation (RSC), therapist, practitioner, or other 0 – 3 provider (IMH-E®) or 3 – 6 provider (ECMH-E®).

NOTE: Help the examinee to organize their thoughts by having them write out responses to questions, key terms, concepts, strategies, and contextual considerations, as outlined in Step One and Step Two below, *before meeting with you*. When you meet with them, they will share their written work with you.

### **STEP ONE:**

Stress the importance of reading a selection of resources from the *Endorsement Examination Preparation Resource List*<sup>4</sup> to sharpen the examinee's knowledge base and strengthen contextual consideration of the following:

- Developmental norms of infant, toddler, young child, and family relationship development, keeping executive functioning in mind
- Key terms and concepts, including:
  - attachment
  - internal working model
  - reflective functioning/capacity
  - culture
  - typical development 0 – 3 (IMH-E®)
  - [typical development 0 up to 6 years \(ECMH-E®\)](#)
  - brain development
  - formal and informal assessment
- Infant-early childhood mental health (IECMH) strategies (developmental guidance, supportive counseling, advocacy, infant/child parent psychotherapy, emotional support, material needs, concrete assistance, etc.)
  - Ask examinee to put their understanding of IECMH practice into words by:
    - using examples from their own cases to describe IECMH strategies
    - reminding them that, since we are always observing and assessing, it is essential to first observe, then assess, and to be aware of distinguishing one from the other
    - reminding them to consider and wonder about the cultural differences and similarities from their own cases, between all those involved (including themselves as the services provider), in the intervention(s). Conscious awareness of our own culture as well as the culture of those with whom they are working, impacts every aspect of our work and lives
- RSC relationships
  - Ask examinee to put their understanding of RSC into words by:
    - describing RSC

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- stating why they think RSC is required for all who are providing services to infants, toddlers, young children, and their families?
- stating what they believe to be the primary roles of the supervisee/consultee and the supervisor/consultant?
- stating how they believe that RSC assists both the supervisee/consultee and the supervisor/consultant?

**STEP TWO:**

*\*\*It should be noted that Step Two gives guidance around how to respond to the clinical vignettes, for IMHS/ECMHS and IMHM-C/ECMHM-C examinees. Step Two does not apply to Policy or Research/Faculty examinees.*

Work with a sample vignette(s)<sup>5</sup> and have the examinee write their responses to the following:

- FIRST: Identify the IECMH strategies to be utilized within the vignette
- SECOND: Identify and consider the status of each participant within the vignette
- THIRD: Put themselves into the vignette, have them identify their feelings, their assessments and/or service plans
- FOURTH: Have them consider:
  - Who do they resonate with? Why?
  - Who makes them uncomfortable worried, or even scared? What’s their initial response to those feelings?

THEN, have the examinee write responses to any of the following questions:

- What did you find yourself wondering about?
- How would you engage the caregiver(s)?
- What do you know?
- What would you like to learn more about? How would you go about learning those things?
- What did you notice going on inside your body as you read the vignette? How does this inform your understanding of the family and/or yourself?
- What would you need from your reflective supervisor/consultant if you were this practitioner?
- How does the caregiver’s history pose challenges to the relationship?
- In this vignette, how would you address issues of race, culture, and ethnicity?
- What safety considerations do you need to keep in mind for this vignette?

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<sup>5</sup> Sample vignettes may come from your own work in the form a case study; may be created by your Exam coach; may be a vignette you received at a training or conference; or may come from the book “Case Studies in Infant Mental Health: Risk, Resiliency, and Relationships” Joan J. Shirilla &. Deborah J. Weatherston, Editors.

- Where does the hopefulness lie?

Remind them that the vignettes provide illustrations of IECMH theories and constructs. Similarly, all of the questions are based on IECMH theories and constructs. Discuss the importance of responding to the vignette, not to the “textbook” origin of the theory or construct.

Have them practice time-saving succinctness by re-reading and then shortening their responses, i.e. saying the same things with fewer words.

### **STEP THREE:**

Set up a time to meet with the examinee. Allow 1-2 hours for this session. It will be helpful to receive copies of all written prep work from the examinee before this meeting. Remember that your central role as a coach is to help the examinee feel prepared to successfully complete the Endorsement® Exam.

### **STRAIGHT TALK BETWEEN YOU AND THE EXAMINEE CAN BE VERY HELPFUL. ADVISE AND COACH THEM TO:**

- Prepare for the Exam in such a way that allows them to feel confident to show the Exam reviewers that they are “ready.” i.e. encourage them to think, consider, and respond according to “best practice,” (this is particularly useful when there are circumstances within the vignettes that aren’t following what they know to be ‘best practice’)
- Practice focusing on ‘Who needs what?’ when they respond to the Exam vignettes
- Encourage the examinee to think about what they would want if you were the parent/caregiver in the Exam vignettes. Additionally, have them think about what they would like to offer the parent/caregiver in the Exam vignettes so that the child’s needs could be met. This will enable the examinee to put more of themselves into their response
- Encourage the examinee to think about what they would want if you were the supervisee/consultee in the Exam vignettes (IMHM-C/ECMHM-C only)

### **GENERAL REFLECTIONS ABOUT YOUR ROLE AS AN ENDORSEMENT® EXAM COACH:**

- The coaching process has to begin with an examinee who feels ready to be endorsed as an IMHS/ECMHS or IMHM/ECMHM, this includes:
  - Ability to assist family in setting goals for infants, toddlers, young children, parents/caregivers, and relationship well-being
  - Being comfortable in talking about what they’ve learned about infants, toddlers, young children, and families as you’ve carried out your professional work thus far
  - Recognizing the impact that racial, ethnic, and cultural identities and experiences have on all relationships, and being able to explore the significance of cultural differences in relationship development, particularly between interventionists and families, and between supervisors and supervisees



- Recognizing the impact of trauma on development, health and well-being, and relationships, including experiences of domestic violence, history of abuse/neglect, and experiences of loss/grief
- Recognizing the impact of poverty on all individuals and their relationships, including parent/caregiver-infant/toddler/young child
- Recognizing that complex stresses on parents/caregivers can result in losing sight of the importance of the infant/toddler/young child. **The infant/toddler/young child's needs are at the center of all IECMH intervention, and must not be forgotten or obscured, however chaotic that family's circumstances may be**
- Sufficient case experience; reflect on the range of their case experience with 0 – 3 year olds (IMH-E®) or 3 up to 6 year olds (ECMH-E®) and their families, do you both feel it has been satisfactory in preparing for the Exam?

### **SUGGESTIONS FOR STRENGTHENING EXAM-TAKING READINESS:**

This may be particularly helpful if you are a program supervisor or reflective consultant:

- Institute a plan for all staff or consultees to read one article each month specific to IECMH, e.g., *ZERO TO THREE Journal* or *Infant Mental Health Journal*, and discuss in the team meeting or consultation, “What resonated with you?”
- Strongly encourage all direct service staff to include case videos in case presentations/discussions
- With the examinee, review *What to Know About the Endorsement Exam?*<sup>6</sup>

### **REMINDER FOR ALL ENDORSEMENT® EXAM COACHES:**

- While maintaining clear, firm expectations regarding what Endorsement® examinees *should* know, it is important to allow opportunities for vulnerabilities, with often declared and repeated statements of encouragement, such as, “I want to work with you because I *want* you to do well on this Endorsement® Exam!”

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