



**INFANT-TODDLER MENTAL HEALTH  
COALITION OF ARIZONA**

**Endorsement for Culturally Sensitive, Relationship-Based Practice**  
*Celebrating Quality Connections with Families Promoting Infant Mental Health*

**ITMHCA ENDORSEMENT (IMH-E®)  
REFERENCE FORM  
APPLICANT'S WAIVER CERTIFICATE**

Name of ITMHCA Applicant: \_\_\_\_\_  
*Please Print:* (Last) (First)

TO THE CANDIDATE: You may voluntarily waive your right to have access to a specific Professional Reference Form written about you in accordance with The Federal Family Education Rights and Privacy Act of 1974, by signing and dating this certificate.

**I waive, relinquish and disclaim** all my rights to have access to the Professional Reference Form for ITMHCA Endorsement.

\_\_\_\_\_  
Applicant's Signature Date

**INFANT TODDLER MENTAL HEALTH COALITION OF ARIZONA (ITMHCA)  
PROFESSIONAL REFERENCE FORM FOR  
ENDORSEMENT AT LEVELS I & II**

*To be completed by supervisor/mentor/consultant/teacher/colleague (circle).*

Name of individual serving as reference: \_\_\_\_\_

Level of Endorsement at which individual is applying: \_\_\_\_\_

You have been selected to complete the reference form for a service provider/professional applying for endorsement by the Infant Toddler Mental Health Coalition of Arizona (ITMHCA). The information that you provide on this form will help to establish the candidate's eligibility for the ITMHCA Endorsement.

For more information about the Endorsement requirements and competency guidelines, please go to [www.itmhca.org](http://www.itmhca.org) under the Endorsement tab.

**Please return the form to the candidate in an envelope with your signature over the sealed flap.**

Thank you for your contribution to maintaining high standards for service providers and professionals promoting infant mental health.

Name of Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_  
\_\_\_\_\_

Applicant's Daytime Telephone (including area code): \_\_\_\_\_

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The rating scale is:

- 0 – No Opportunity to Observe
  - 1 – Minimal Ability
  - 2 – Below Average Ability
  - 3 – Average Ability
  - 4 – Above Average Ability
  - 5 – Exceptional Ability
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### **Theoretical Foundations**

1. Demonstrates knowledge of early parenthood roles. (*Pregnancy & Early Parenthood*)  
0      1      2      3      4      5
2. Demonstrates knowledge of infancy and toddler development and behavior within a relationship context. (*Infant/Very Young Child Development & Behavior*)  
0      1      2      3      4      5
3. Demonstrates the ability to identify and acknowledge infant and parent (caregiver) strengths and follow the parent (caregiver's) lead. (*Infant/Very Young Child-Family Centered Practice*)  
0      1      2      3      4      5
4. Understands and demonstrates the ability to offer emotional support to parents or other caregivers in a manner that strengthens early relationships with infants and young children. (*Relationship-Focused Therapeutic Practice*)  
0      1      2      3      4      5
5. Demonstrates capacity and/or teaches others to nurture and promote early developing parent-child relationships (*Family Relationships & Dynamics*)  
0      1      2      3      4      5
6. Identifies emerging competencies of the infant/very young child within a relationship context; recognizes and addresses risks related to histories of separation, trauma, and/or loss. (*Attachment, Separation, Trauma, & Loss*)  
0      1      2      3      4      5
7. Demonstrates ability to understand and respect ethnicity, culture, individuality, and diversity. (*Cultural Competence*)  
0      1      2      3      4      5
8. Demonstrates the ability to identify risks and delays that threaten the emotional well being of the infant and parent/caregiver. (*Disorders of Infancy/Early Childhood*)  
0      1      2      3      4      5

### **Law Regulation, & Policy**

9. Demonstrates behaviors that reflect the ITMHCA Code of Ethics in service provision. (*Ethical Practice*)  
0      1      2      3      4      5
10. Demonstrates capacity to work within the letter and spirit of federal and state law, agency policies and practices, and professional code of conduct. (*Government, Law, & Regulation; Agency Policy*)  
0      1      2      3      4      5

### **Systems Expertise**

11. Demonstrates the ability and/or teaches others to identify, obtain and use available resources for infants and families, *i.e.*, food, housing, baby items, child care, medical care, and protection. (*Community Resources*)  
0      1      2      3      4      5

**Direct Service Skills**

12. Demonstrates ability to promote parental competence in facing challenges, resolving & reducing likelihood of future crises, solving problems of basic needs and familial conflict. (*Life Skills*)

0      1      2      3      4      5

13. Demonstrates the ability to incorporate what is seen, heard, and discussed with parents or other caregivers into a mutually agreed upon service. (*Observation & Listening*)

0      1      2      3      4      5

14. Demonstrates ability to observe, assess, and support infants and toddlers within the context of parent/child interactions and relationships. (*Screening & Assessment*)

0      1      2      3      4      5

15. Demonstrates capacity to respond with emotional sensitivity to both the infant and the parent/caregiver, promoting and enhancing social and emotional well-being. (*Responding with Empathy*)

0      1      2      3      4      5

**Working with Others**

16. Demonstrates the capacity and/or teaches others to work as a partner/team member with program and agency representatives to enhance/establish programs and/or to educate the community. (*Supporting Others; Mentoring*)

0      1      2      3      4      5

17. Demonstrates ability to establish trusting working relationships with parents and other caregivers on behalf of social and emotional development of infants/toddlers and families. (*Building & Maintaining Relationships*)

0      1      2      3      4      5

18. Demonstrates the capacity to collaborate with other professionals and/or community service programs as needed for optimal services for infants, young children and families. (*Collaborating*)

0      1      2      3      4      5

19. Generates new insights and workable solutions to issues related to effective, culturally sensitive, relationship-based practice. (*Resolving Conflict*)

0      1      2      3      4      5

20. Demonstrates the understanding of and respect for individual values and beliefs. (*Empathy & Compassion*)

0      1      2      3      4      5

**Communicating**

21. Demonstrates ability to actively listen to others. (*Listening*)

0      1      2      3      4      5

22. Demonstrates ability to communicate clearly, honestly, sensitively, and diplomatically. (*Speaking*)

0      1      2      3      4      5

**Thinking**

23. Demonstrates capacity to see and explain the interaction of multiple factors & perspectives understand the “big picture” when analyzing situations. (*Analyzing Information*)

0      1      2      3      4      5

24. Demonstrates capacity to use multiple strategies to help parents and caregivers understand their role in the social and emotional development of young children. (*Solving Problems*)

0      1      2      3      4      5

25. Demonstrates capacity to make good judgments, to be firm, fair and clear. (*Exercising Sound Judgment*)

0      1      2      3      4      5

26. Understands appropriate personal boundaries with all infants and families served. (*Maintaining Perspective*)

0      1      2      3      4      5

27. Assigns priorities to needs, goals, and actions. (*Planning & Organizing*)

0      1      2      3      4      5

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[www.itmhca.org](http://www.itmhca.org)

Reference Form for Levels I & II

**Reflection**

28. Regularly examines own thoughts, feelings, strengths, and growth. (*Contemplation*)

0      1      2      3      4      5

29. Demonstrates the ability to seek out and use reflective supervision/ consultation, as appropriate. (*Self-Awareness*)

0      1      2      3      4      5

30. Remains open and curious. (*Curiosity*)

0      1      2      3      4      5

31. Enrolls and completes trainings or coursework to continue development in the infant/family field. (*Professional/Personal Development*)

0      1      2      3      4      5

32. Uses reflective practice to understand own emotional response to infant /family work. (*Emotional Response*)

0      1      2      3      4      5

Comments:

**INFANT TODDLER MENTAL HEALTH COALITION OF ARIZONA ENDORSEMENT (IMHE®)  
PROFESSIONAL REFERENCE RATING FORM  
TEACHER, SUPERVISOR, CONSULTANT, COLLEAGUE**

Applicant's Name

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

Daytime Telephone (including area code): \_\_\_\_\_

Credentials/Discipline/Education: \_\_\_\_\_

Years of Work with infants, toddlers, caregivers, and families: \_\_\_\_\_

Current Position: \_\_\_\_\_

You are which in relationship to applicant?:

Supervisor    Teacher    Consultant    Supervisee    Colleague

Briefly describe the nature of your work together or your professional relationship:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Address of agency or organization where mentoring/supervision/consultation/training took place:

\_\_\_\_\_  
\_\_\_\_\_

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 ITMHCA Endorsement.  
The information I have provided on this form is correct to the best of my knowledge and belief.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please return completed form to the applicant in a sealed envelope with your signature over the flap.***