

Self-Assessment and Attestation Form, Advanced and Reflective Practice Consultant-1

New Hampshire Early Childhood and Family Mental Health Core Competencies: Advanced and Reflective Practice Consultant-1 Self-Assessment and Attestation

Applicant's Name: _____

Assigned Reflective Practice Consultant/Approved Supervisor: _____

Through a process of self-assessment and attestation, this tool documents the achievement of the early childhood mental health competencies, (birth to six), required for the **NH ECFMH Advanced and Reflective Practice Consultant-1** credentials. Advanced credential applicants should complete **only** Domains I-VI. RPC-1 applicants who hold an Advanced credential need only complete Domain VII, and RPC-1 Applicants who DO NOT already possess the Advanced credential or an equivalent must complete all Domains, I-VII. This document is to be submitted with the ECFMHC Application and other required supporting documentation. 90% competency level in each domain is required for approval.

Instructions for those applying for Advanced Certificate:

This credential is appropriate for personnel providing direct services to children and families, and training and consultation to other professionals. They may be in supportive, clinical, supervisory, administrative or roles. To view all requirements for Advanced Credential, [click here](#) or view "Advanced and Intermediate Credential Requirements".

Steps for Self-Assessment, Documentation and Attestation:

1. Read the Advanced Level Competencies for Early Childhood and Family Mental Health Professionals carefully
2. Identify examples which demonstrate your skills/knowledge in relation to each competency
3. Mark each skill as "**D**=Demonstrated, **E**=Emerging, **N**=Not yet demonstrated" and review with your Reflective Practice Consultant
4. Engage in professional development activities which will allow you to develop needed skills until you demonstrate the competencies required
5. Midpoint in your consultation period, together with your Reflective Practice Consultant, update your self-assessment rating
6. At the end of the consultation period, conduct a final review, during which the Reflective Practice Consultant confirms self-assessment in each domain with a signature. This may require additional documentation and/or observation
7. Candidates must demonstrate 90% competency in each domain area to achieve their credential. It is allowable to count one "emerging competence" as "demonstrated" when the competence is approved by the Reflective Practice Consultant.
8. Use the information gained to inform professional development

Instructions for those applying for Reflective Practice Consultant- 1 Certificate:

This credential is required for those providing Reflective Practice Consultation to individuals pursuing or maintaining their ECFMH Certification. These ECFMH RPC-1 certificate holders are approved to provide individual ECFMHC consultation and/or facilitate ECFMHC Reflective Practice Consultation groups. To view all requirements for the RPC-1 Credential, [click here](#) or view “Reflective Practice Consultant Requirements”

Steps for Self-Assessment, Documentation and Attestation:

1. RPC-1 applicants who hold an Advanced credential need only complete Domain VII, and RPC-1 Applicants who DO NOT already possess the Advanced credential or an equivalent must complete all Domains I-VII.
2. Review these competencies carefully
3. Identify examples which demonstrate your skills/knowledge in relation to each competency
4. Mark each skill as “**D**=Demonstrated, **E**=Emerging, **N**=Not yet demonstrated”
5. Engage in Professional development activities which will allow you to develop needed skills until you demonstrate 90% of the competencies in each domain. It is allowable to count one “emerging competence” in each domain as “demonstrated”
6. This self-assessment, together with the results of Reflective Practice Questionnaires, completed by 2 supervisees, OR a letter from an approved RPC documenting the candidate has co-lead 24 hours of a Reflective Practice group, will serve as competence evidence for the RPC application
7. Provide the names and emails of at least 2 people for whom you have provided Reflective Practice Consultation for at least a period of one year here:
 - a. _____
 - b. _____
 - c. _____

| Core Knowledge Area (Domains) | Sub-Domain | Competency | Self-Assessment D E N |
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| I. Philosophy and Professional Orientation | A. Family-centered Strength and Outcome-based Philosophy | 1. Understands, adheres to, and promotes adherence to the Core Principles of the New Hampshire Association for Infant Mental Health | D E N |
| | | 2. Develops new solutions to meet challenges in providing effective family centered services | D E N |
| | | 3. Supports families and caregivers in identifying their own strengths, needs and priorities | D E N |
| | | 4. Designs assessments, interventions, individual child and family outcomes and programs that build on family, caregiver and child strength and self-identified priorities and goals | D E N |
| | | 5. Employs a strength and outcome-based approach to planning and intervention | D E N |
| | | 6. Assesses and uses findings to develop and refine outcomes and interventions, and evaluate quality of interventions | D E N |
| | B. Self-knowledge, Self-assessment, and Professional Development | 1. Is knowledgeable about concepts of, and research about unconscious bias | D E N |
| | | 2. Examines own practice and biases, and, with a self-reflective lens, seeks feedback from families, peers, and supervisees | D E N |
| | | 3. Provides consultation, training and support to colleagues and supervisees that is reflective of an awareness of unconscious biases | D E N |
| | | 4. Supports others to reflect on their own values, biases, and strengths and needs | D E N |
| | | 5. Promotes best practices and culturally competent practice in all aspects of service provision | D E N |
| | | 6. Informally assesses own practices, identifying areas of strengths and needs, using Advanced level competencies | D E N |
| | | 7. Develops objectives for an individualized professional development plan and seeks appropriate professional development activities, monitoring own progress | D E N |

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| | | 8. Models self-reflection, reflective practice, and seeks feedback from families, peers, and supervisees | D E N | |
| | | 9. Seeks and provides ongoing supervision, consultation and/or mentoring opportunities for others | D E N | |
| | | 10. Uses self-assessment to develop own individualized professional development plan | D E N | |
| | | 11. Supports others to create and monitor their own individualized professional development plan | D E N | |
| | C. Ethics and Confidentiality | | 1. Models the provision of caring, compassionate, and culturally competent services to children and families | D E N |
| | | | 2. Researches and assures own and supervisee compliance with laws and policies that govern ethical practice | D E N |
| | | | 3. Provides consultation regarding child and family rights, confidentiality, mandatory reporting, and other appropriate laws | D E N |
| | D. Effective Communication Skills | | 1. Establishes and practices effective communication and reflection with and among professionals and colleagues as well as families | D E N |
| | | | 2. Practices open, honest, sensitive communication skills using jargon-free language | D E N |
| | | | 3. Designs learning opportunities that reflect principles of child and adult learning and that are meaningful to children and adults | D E N |
| | E. Teamwork and Collaboration | | 1. Demonstrates group facilitation skills | D E N |
| | | | 2. Demonstrates effective problem solving, negotiation, conflict resolution and mediation skills | D E N |
| | | | 3. Solicits, accepts, and provides consultation and feedback to teams and others around meeting needs of children and families | D E N |
| | | | 4. Plans, implements, and monitors collaborative work across disciplines | D E N |

I attest that the candidate demonstrates a minimum 24/27 of the competencies in the domain of *Philosophy and Professional Orientation*, one of which may be “emerging”.

Name: _____ Date: _____

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| II. Family Systems | A. Family Characteristics | 1. Provides opportunities for families and providers to explore and celebrate the diversity of customs reflected by families in the community | D E N |
| | | 2. Describes and implements policies that foster respect and inclusion of all children and families | D E N |
| | | 3. Uses genograms, family mapping and other family systems tools w/ families for better understanding | D E N |
| | | 4. Demonstrates broad understanding of theoretical frameworks of family systems and interaction | D E N |
| | B. Factors Impacting Family Functioning | 1. Supports caregivers in becoming aware of how their own childhood experiences affect their interaction with their children | D E N |
| | | 2. Designs and provides trainings that help parents to learn about child development, and the influence of one's own child-rearing experiences | D E N |
| | | 3. Refers and/or provides skill development training to parents | D E N |
| | | 4. Provides consultation regarding family dynamics | D E N |
| | C. Supporting Families | 1. Provides consultation, training and supervision reflecting evidence-based approach to working with families | D E N |
| | | 3. Enhances young children's functioning at home, center or school-based programs by identifying and applying appropriate interventions and community supports | D E N |
| | | 4. Engages with family in a meaningful way to learn about family's strengths, needs and priorities when planning assessment, outcomes and interventions | D E N |
| | | 5. Develops and provides information, and consultation on topics of disparity and diversity with a goal of promoting cultural competence and creating welcoming inclusive environments | D E N |
| | | 6. Ensures services and programs are culturally appropriate and relevant | D E N |

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| | | 7. Actively promotes family engagement and leadership through developing opportunities for family members to fill positions of leadership within the community | D E N |
| | | 8. Actively supports peers and supervisees in recognizing, valuing and encouraging family voice, engagement and leadership in program development, evaluation, and within the community | D E N |
| | | 9. Demonstrates the ability to oversee staff's work with families | D E N |
| | | 10. Identifies and shares with family information about the broader child development and resources and systems that may be of help to them | D E N |
| | | 11. Provides consultation to staff and direct support to families regarding how to increase family's capacity to negotiate and advocate for own services | D E N |

I attest that the candidate demonstrates a minimum of 16/18 of the competencies in the domain of *Understanding Families*, one of which may be "emerging".

Name: _____ Date: _____

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| III. Child Development | A. Knowledge of Child Development | 1. Uses knowledge of typical and atypical child development and the individual child's and family assessment data to plan outcomes | D E N |
| | | 2. Provides supervision, consultation and training that promotes the use of developmentally appropriate practices and intervention strategies that support and address child development outcomes | D E N |
| | | 3. Provides training and consultation to families and others regarding child development reflecting the intertwined nature of developmental domains during early development | D E N |
| | | 4. Uses current and valid screening tools and administers initial and ongoing strength-based assessments to evaluate children's development in all developmental areas | D E N |
| | | 5. Analyzes results of individual evaluations as relates to overall assessments, and makes appropriate recommendations | D E N |

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| | | 6. Supervises staff to ensure that opportunities for child-child and adult-child interaction are supported, with the intent of promoting language development and early literacy | D E N |
| | | 7. Uses and models intervention strategies related to communication and language difficulties and delays, conferring with specialists as needed | D E N |
| | | 8. Teaches families and staff strategies for promoting children's language development | D E N |
| | | 10. Assists staff in analyzing their own communication styles | D E N |
| | | 11. Discusses child temperament and attachment in the broader context of family dynamics and systems | D E N |
| | | 12. Maintains up to date knowledge of current research on the interactions of temperament, attachment and family dynamics | D E N |
| | | 13. Provides training and/or consultation on temperament and attachment | D E N |
| | B. Impact of Relationships | 1. Demonstrates understanding of how parental relationships, expectations, fears and hopes, and environmental factors can impact the bonding process and social emotional development | D E N |
| | | 2. Provides training and consultation informed by awareness of how parental relationships, expectations, fears and hopes, and environmental factors can impact attachment and social emotional development | D E N |
| | | 3. Demonstrates awareness of red flags and risk factors for attachment and bonding challenges | D E N |
| | | 4. Provides training and education to parents, caregivers and community about the positive effects of responsive and nurturing relationships in reducing the impacts of adversity | D E N |
| | | 5. Provides consultation and training regarding supporting caregiver self-regulation, informed by an understanding the relationship between the caregivers' capacity and the child's learning | D E N |
| | | 6. Develops and implements strategies that enhance attachment relationships | D E N |

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| | | 7. Provides caregiver consultation regarding issues of loss and transition | D E N |
| | | 8. Uses therapeutic approaches and demonstrates skills in working individually with children experiencing loss and their families | D E N |
| | | 9. Provides intervention, training, supervision and consultation informed by current research on the impacts of separation and loss | D E N |
| | C. Social and Emotional Development | 1. Implements and trains others to implement various evidence informed social skills curricula and intervention models or approaches | D E N |
| | | 2. Provides coaching and consultation to parents and providers regarding how to create opportunities for to nurturing young children's social and emotional development | D E N |
| | | 3. Models strategies that support children's development of positive interpersonal relationships when working with individual children, groups of children, or when providing consultation | D E N |
| | | 4. Assesses children's play and caregiver-child play interactions through observation and other current valid and reliable assessment tools | D E N |
| | | 5. Uses therapeutic play and other expressive therapies, conferring with specialists as needed | D E N |
| | D. Impact of Environmental Factors | 1. Is knowledgeable about and provides training, consultation and supervision related to the impacts of Adverse Childhood Experiences on health and development | D E N |
| | | 2. Is knowledgeable about and provides training, consultation and supervision regarding the impacts of protective factors on health and development | D E N |
| | | 3. Provides consultation and/or supervision which supports others in recognizing specific aspects of the child's eco-system, (e.g. family, school, community, etc.) and the potential impact on development | D E N |
| | | 4. Recognizes specific environmental factors and demonstrates understanding of how they impact the child and family | D E N |
| | 5. Provides consultation and/or supervision which supports others in recognizing and supports environmental factors that ameliorate exposure to trauma, and build resilience | D E N | |

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| | | 6. Administers and trains others to administer tools and procedures for assessing environmental conditions and their impacts on children and families | D E N |
| | | 7. Trains and supports others in making referrals, or supporting families in making self-referrals to appropriate agencies | D E N |
| | | 8. Provides specific interventions that address and correct adverse environmental factors and strengthen positive ones | D E N |
| <p>I attest that the candidate demonstrates a minimum of 31/34 competencies” in the domain of <i>Child Development</i>, one of which may be “emerging”.</p> <p>Name: _____ Date: _____</p> | | | |
| IV. Screening and Assessment | A. General Knowledge of Assessment | 1. Provides developmental and social emotional screening and/or assessment using current, valid and culturally appropriate tools | D E N |
| | | 2. Ensures that the family’s priorities, strengths, needs and concerns are represented and addressed | D E N |
| | | 3. Accurately assesses strengths and needs of child, taking into consideration individual characteristics, the quality of attachment relationships, psychosocial stressors and protective and environmental factors | D E N |
| | | 4. Researches and or has a comprehensive understanding of specific current and valid assessment types, tools and procedures appropriate for young children and their families | D E N |
| | | 5. Provides guidance and support to others in determining which screening and assessment tools to consider | D E N |
| | | 6. Provides training and consultation to others regarding the purposes, benefits and limitations of formal and informal assessment | D E N |
| | | 7. Is knowledgeable about legal and ethical guidelines as they related to assessment and shares that information with teams and families | D E N |
| | | 8. Adheres to ethical and legal guidelines and requirements of assessment tools and process | D E N |
| | B. Implementation of Assessment | 1. Facilitates decisions with families, professionals and teams regarding the need for assessment | D E N |

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| | | 2. Develops and plans assessment (including methods and tools of data collection to be used) based on referral issues | D E N |
| | | 3. Conducts formal and informal assessments using interviews, checklists, health nutrition and medical information and other tools and observations that can be used for intervention | D E N |
| | | 4. Identifies need for specialized assessment and further evaluation in specialized areas | D E N |
| | | 5. Is able to specifically assess the quality of attachment relationships, the impacts of psychosocial stressors, presence of protective factors and environmental factors, using current valid reliable and culturally appropriate tools | D E N |
| | | 6. Supervises staff doing assessments | D E N |
| | | 7. Interprets assessment results for the purposes of making recommendations about treatment or interventions | D E N |
| | | 8. Develops summary reports with recommendations for family and team | D E N |
| | | 9. Consults with family, other professionals and teams to develop a plan of intervention and support in accordance with best practices | D E N |
| | | 10. Monitors ongoing implementation of assessment recommendations in programs and services | D E N |
| | | 11. As part of ongoing assessment process, reflects on current implementation to determine if progress is being made and if not, adjusts practices accordingly | D E N |
| | | <p>I attest that the candidate demonstrates a minimum of 17/19 of the competencies in the domain of <i>Screening and Assessment</i>, one of which may be “emerging”.</p> <p>Name: _____ Date: _____</p> | |
| V. Addressing Challenges | A. Risk, Resilience and Protective Factors in Children and Families | 1. Designs/provides interventions and programs, including those that reduce risk factors and build protective factors | D E N |
| | | 2. Designs/provides interventions and programs addressing specific concerns identified through assessment | D E N |

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| | | 3. Provides training and consultation about tools used to screen and identify Adverse Childhood Experiences, when and how to use them | D E N | |
| | | 4. Provides training and consultation about tools used to identify protective factors and tools to promote them | D E N | |
| | | 5. Demonstrates and shares knowledge of community resources designed to address risk factors and promote protective factors | D E N | |
| | B. Knowledge of Vulnerable and Identified Populations | | 1. Demonstrates ability to utilize multidisciplinary therapeutic approaches | D E N |
| | | | 2. Facilitates child and family team meetings and team process | D E N |
| | | | 3. Recommends intervention strategies to child/family team participants | D E N |
| | | | 4. Develops child and family plan for child/family team appropriate to settings, (i.e., childcare classroom, medical home, etc.) | D E N |
| | | | 5. Creates and/or uses a system for ongoing assessment and tracking of progress toward the desired child and family outcomes | D E N |
| | | | 6. Provides feedback to child/family teams regarding progress and helps them access further evaluation if needed | D E N |
| | | | 7. Supervises staff to evaluate effectiveness of interventions and approaches and designs modifications, in partnership with the family, and team | D E N |
| | | 8. Provides training (preferably with a family partner) on collaborative multidisciplinary process and approaches to serving families and children | D E N | |
| | | 9. Provides supervision, support and consultation to those providing intervention and support to children and families in a variety of settings | D E N | |
| | | 10. Seeks consultation with appropriate specialist to obtain specific direction and guidance when the concern is outside area of expertise | D E N | |
| | C. Effective Transitions | 1. Designs transition plans and interventions for children and families based on their specific strengths and needs | D E N | |
| | | 2. Provides trainings, supervision and consultation regarding strategies | D E N | |

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| | | for supporting successful transitions | |
| | | 3. Provides consultation to staff and child/family team in identifying transition needs and resources | D E N |
| | | 4. Develops protocols for transition planning across settings | D E N |

I attest that the candidate demonstrates a minimum of 17/19 of the competencies in the domain of *Addressing Challenges* one of which may be “emerging”.

Name: _____ Date: _____

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| VI. Systems Resources | A. Systems and Resources | 1 Provides supervision or technical assistance to staff who are seeking and brokering services and/or providing case management services | D E N |
| | | 2 Engages in creative problem solving to meet needs when existing policies or resources do not meet the specific needs of the child/family | D E N |
| | | 3, Participates in or leads agency, regional or state level planning teams | D E N |
| | | 4. Provides technical assistance to assure that information about new and existing resources and entitlements are known by staff and community partners | D E N |
| | | 5. Seeks needed resources by collaborating with community and state partners to identify funding opportunities and new entitlement programs | D E N |
| | | 6. Participates in advocacy activities and supports staff in advocating for families | D E N |
| | | 7. Provides consultation to assist providers in connecting families with needed resources and services, including those which support health, nutrition, education, safe and stable housing, childcare, positive parent-child relationships, caregiver well-being, and family financial security | D E N |
| | | 8. Provides consultation to assist providers in identifying culturally and linguistically appropriate resources and services for children and families | D E N |

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| | | 9. Identifies persistent challenges such as gaps in services or general support to families that may require systems change | D E N |
| | | 10. Develops interagency agreements to support families | D E N |
| | B. Laws, Polices and Procedures | 1. Navigates laws, rules and policies that may have an impact on coordination of services and safety of staff while on the job | D E N |
| | | 2. Addresses legal issues appropriate to setting | D E N |
| | | 3. Participates in policy development for own agency or organization | D E N |
| | C. Program Planning and Evaluation | 1. Uses outcome-based evaluation and community needs assessment in strategic planning | D E N |
| 2. Facilitates or participates in strategic planning for program design and evaluation. | | D E N | |
| 3. Identifies and provides training about use of program best practices in support of children and families | | D E N | |
| 4. Writes grant and seeks additional resources for program development | | D E N | |
| 5. Develops policies and procedures, including those which ensure safety, increase access, and promote inclusion, collaboration, and family engagement, and evidence supported practices. | | D E N | |
| <p>I attest that the candidate demonstrates a minimum of 16/18 of the competencies in the domain of <i>Systems Resources</i>, one of which may be “emerging”.</p> <p>Name: _____ Date: _____</p> | | | |
| VII. Reflective Practice Facilitation * | A. Clarity Regarding Roles and Ethics | 1. Demonstrates the ability to clearly communicate the role of reflective facilitator, with attention to limitations of any supervisory responsibility, and clarification where multiple roles or overlapping roles may occur | D E N |

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| | 2. Evidences accomplishment within a particular infant-family and early childhood mental health orientation or conceptual framework as well as awareness of alternative infant-family and early childhood mental health orientations or conceptual frameworks | D E N |
| | 3. Understands and can explain the legal and ethical issues pertinent to the role of the facilitator, such as when issues presented in reflective practice facilitation sessions must be referred back to program supervisors or discussed with program administrators | D E N |
| | 4. Understands that a variety of legal and ethical issues exist pertinent to a scope of practice and is able to support the practitioner in seeking clarity about these issues as needed | D E N |
| | 5. Is able to sensitively assist the practitioner in reflecting on his or her disciplinary scope of practice and the interdisciplinary nature of infant-family and early childhood mental health work, including identifying both when additional referrals or consultation are needed for a child or family and recognizing when there may be more professionals or agencies involved with a family than may be helpful or welcome | D E N |
| | 6. Is able to help the practitioner recognize and maintain professional boundaries in a variety of intervention/treatment settings such as home, child development center, social service system, health facility, or other community setting | D E N |
| | 7. Is able to help the practitioner assess the strengths and limitations of the practice setting and to consider best ways to provide services given family needs and relational and practical possibilities, as well as limitations and the need to consider interagency referral and/or collaboration | D E N |
| | 8. Can help the practitioner learn to listen closely to the family and discover the things that are important to them about their child and themselves and then collaborate with the family on behalf of the child. This means embracing the idea that intervention must be rooted in a worry or a wish that a family has in relation to a child, rather than in some motivational system entirely external to the family | D E N |

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| | | 9. Possesses the ability to assist the practitioner to learn how to set the frame for the work as focused on parent-child relationships in spite of multiple needs and distractions | D E N |
| | | 10. Understands the power and privilege dynamics in supervision/consultation | D E N |
| | B. Understanding Personal Influence Issues | 1. Demonstrates an appreciation of the importance of <u>relationships</u> as central to infant and early childhood development and mental health, as reflected in both attention to relationship between the practitioner and the families they work with and a strong commitment to consistent reflective practice facilitation meetings and attentiveness to the relationship between the RPC and practitioner. | D E N |
| | | 2. Possesses a basic set of skills that is both embodied by the reflective facilitator and promoted in the practitioner. These include a nonjudgmental, accepting stance; facility with interpersonal understanding and inquiry; and promotion of positive change | D E N |
| | | 3. Has the ability to consider and address issues of culture, including the impact of racism, class, immigration-related issues, socioeconomic issues, etc. on families, practitioners and the practitioner | D E N |
| | | 4. Expands practitioner's understanding of how to create a feeling of reciprocity, acceptance and comfort/friendliness with a family by allowing for normal everyday social interactions | D E N |
| | | 5. Works with the practitioner to understand that personal characteristics, clinical context, culture, style, and professional role may unconsciously influence the interactive process with families | D E N |
| | | 6. Helps the practitioner learn to observe and reflect on individual behavior and the interactive exchange with others, reflect on these processes, and attribute relational meaning | D E N |
| | | 7. Expands the practitioner's capacities to consider, observe, and monitor impact of interactions on the family and talk with the family about this in a way that is potentially meaningful for them. In addition, the RPC should have the ability to help the practitioner expand these concepts to staff and collateral contacts and consultation relationships | D E N |

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| | | 8. Expands the practitioner's capacities to use self-knowledge and the ability to think about the client's experience to help formulate therapeutic responses and to act on the family's behalf in the context of collateral relationships | D E N |
| | | 9. Expands the practitioner's capacity to understand and accept that each family is unique and will perceive the clinician and the intervention through the lens of their own experience and to extend this idea to work with staff and collateral contacts | D E N |
| | | 10. Supports the practitioner to be able to tolerate strong affect and situations that are ambiguous realizing that these situations may involve not knowing or not understanding behaviors and motivation of the family | D E N |
| | | 11. Helps the practitioner to recognize and think about experienced internal pressures that can "press" toward an emotional response and urges or wishes to act before adequate reflection or assessments are made | D E N |
| | C. Facilitation Skills | 1. Has an ability to understand the developmental level of the practitioner and tailor reflective practice facilitation sessions to individual needs. | D E N |
| | | 2. Sets the tone and establishes norms of Reflective Practice Consultation by maintaining consistent and protected time and place for consultation, demonstrating undivided attention and promoting a supportive and non-judgmental atmosphere for self-reflection | D E N |
| | | 3. Is able to set a tone and plan and sequence the use of time in the reflective practice facilitation sessions that help the practitioner regulate his or her thoughts and emotions so the practitioner can think about and experience his or her work in new ways | D E N |
| | | 4. Possesses basic group skills that support and develop practitioner abilities. Such skills include awareness of and the ability to address unconscious group dynamics, patterns of role assumption in groups, challenges of "airtime" sharing and other group resource sharing issues, group/infant family parallel process possibilities, and the healing/transformational potential of collaborative processes | D E N |

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| | | 5. Inspires confidence in infant-family and early childhood mental health principles and practice that lead to the practitioner's ability to be effective at outreach and relationship-building, successfully engaging families that might otherwise miss needed services | D E N |
| | | 6. Helps practitioners working in nontraditional settings, such as shelters, medical facilities, and early care and education and in developing ways to integrate infant-family and early childhood mental health principles into a variety of settings | D E N |
| | | 7. Supports participants in developing the capacity to understand the families' story | D E N |
| | | 8. Supports participants in developing the capacity to "hold the baby/child in mind" | D E N |
| | | 9. Supports participants in demonstrating appropriate and professional "use of self" | D E N |
| | | 10. Supports participants understanding and use of parallel process | D E N |
| | | 11. Supports participants in developing and utilizing a reflective alliance | D E N |

***Note:** Many of the competencies in the Reflective Practice domain are adapted from those described in Finding an Authentic Voice, Heffron, Ivins, Weston. *Infants and Young Children*. Vol. 18, No. 4, 2005.

I attest that the candidate demonstrates a minimum of 28/31 of the competencies in the domain of *Reflective Practice Facilitation*, one of which may be "emerging".

Name: _____ Date: _____

***I am an approved Reflective Practice Consultant and attest that the candidate demonstrates 90% of the competencies in each of the domain areas
AND that I have provided a minimum of 24 hours per year of consultation to the above individual.***

RPC Name: _____ ***Date:*** _____ ***Signature:*** _____

***I understand that the ECFMH consultation I receive is for the purposes of the ECFMH credentialing process and does not replace or supersede consultation received
through my workplace or private practice. Neither the ECFMH Reflective Practice Consultant nor the credentialing body bear liability for my actions.***

Applicant Name: _____ ***Date:*** _____ ***Signature:*** _____

Approved 02.24