

What to know About the Infant/Early Childhood Mental Health Mentor-Clinical (MHM-C) Endorsement Exam

The intent of this resource is to prepare you for what will be expected within the Infant or Early Childhood Mental Health Mentor-Clinical (I/ECMHM-C) exam.

The exam has two parts, both are based on the Competency Guidelines (MI-AIMH Copyright © 2024), a critical reference in preparing for the exam. The competencies are divided into domains, which are referred to below, and can be found on the EASy website:

<https://vaimh.myeasy.org/competency-guidelines>

Part One: Multiple Choice

The multiple-choice portion of the **IMH-E®** exam is the same for all infant mental health exam respondents and address your knowledge specific to work with pregnant people, infants and toddlers (0-36 months) and their families.

The multiple-choice portion of the **ECMH-E®** exam is the same for all early childhood mental health exam respondents and address your knowledge specific to work with pregnant people, infants, toddlers, young children (ages 0 up to 6 years old), and their families.

Exam respondents will have **90 minutes to answer 60 multiple-choice questions**.

The multiple-choice section is meant to measure what is known and is derived primarily from the knowledge and skill areas found under the **Theoretical Foundations** and **Direct Service Skills domains of the Competency Guidelines**. These domains address your I/ECMH knowledge specific to work with pregnant people, infants/toddlers (0-36 months or age 3 up to age 6) and their families.

- **Theoretical Foundations:** there will be an emphasis on the areas of pregnancy and early parenthood; infant/young child development & behavior; attachment, separation, trauma, grief, & loss; cultural humility, DEI and disorders of infancy/early childhood.
- **Direct Service Skills:** there will be an emphasis on the areas of screening & assessment, parent-infant/very young child relationship-based therapies & practices, and reflective supervision.

While Part 1 of the exam has an emphasis on direct service, there will be some questions related to reflective supervision/consultation, policy, ethical practice, service delivery systems, and research.

Knowledge gained through course work, specialized in-service training, and self-study will be most useful in this section of the exam.

Part Two: Vignettes/Scenarios

Infant/Early Childhood Mental Health Mentor-Clinical Exam respondents have 90-minutes to respond to:

- a) **one of two** direct service vignettes, which must be answered from the perspective of an I/ECMH specialist/practitioner, and
- b) **one vignette** about the provision of RSC, which must be answered from the perspective of a reflective supervisor/consultant.

Both responses must be complete, and both must receive passing scores. If a core concept is described in one response, you should not assume that the concept is “covered.” Critical I/ECMH principles should be apparent in responses to both vignettes.

While all of the knowledge and skill areas of the Competency Guidelines are important, the ones under the **Reflection**, **Thinking**, and **Working with Others** domains are especially important to the qualitative sections. Knowledge and skills gained through RSC about direct service experiences with pregnant women, infants/toddlers (0-36 months) or young children (3-6) and their families **and** about the RSC provided to others will be most useful in this section of the exam.

Your responses to the vignettes are meant to measure how your knowledge of I/ECMH principles and concepts is applied into practice (“ways of being”) and for you to demonstrate a reflective, relationship-based approach specific to work with infants/toddlers (0-36 months) or young children (3-6), their families, and the reflective supervision/consultation you provide to others. It is not meant to measure fidelity to a particular model or treatment modality. It is meant to capture the “how you are” part of IECMH practice, as being just as important as “what you do.” This requires responses from an IECMH perspective that includes the application of parent-infant/young child relationship-based therapies and practices as well as the Best Practice Guidelines for Reflective Supervision/Consultation.

Responses should:

- Explore past and present issues related to attachment, separation, trauma and unresolved losses as they affect the development, behavior, and care of the infant/young child.
- Consider all the relationships presented in the vignettes, including consideration of the parallel process.
- Include use of self.
- Indicate attention to, and exploration of, the role of race and culture in the lives of all people in the vignettes.
- Indicate the capacity to articulate a reasonable number of hypotheses.
- Attend to and explore issues surrounding safety.

You will be asked to respond to (4) four questions after each of the vignettes. (The questions will vary slightly for the direct service and reflective supervision vignettes.) The questions will ask you to share your responses about the possible experiences of the people in vignettes, in addition to your own

understanding, reactions, questions, and thoughts. It will be important for you to keep in mind what you don't know yet.

The review of each response will take into consideration your ability to:

- demonstrate curiosity and openness;
- balance use of thinking and feeling;
- maintain reasonable standards, safeguards and expectations without being judgmental; and
- balance the experiences and perspectives of all members of the vignette, including self as practitioner/supervisor.

Preparation

We encourage you to begin studying as soon as you decide to apply for a Mentor category or upon submission of your application for a formal review.

Self-Reflection & Study

To identify areas where you may find additional study to be useful, refer to:

- a) the *Getting Started Guide*,
- b) the selection of readings from the *Endorsement Exam Prep Resource List*,
- c) the Competencies tab of your EASy application, and
- d) feedback received about your application

Your disciplinary background may also provide guidance. For example, applicants who come from a background that emphasizes development may find they require more studying related to mental health competencies like *attachment, trauma, grief and loss, mental and behavioral disorders in adults, supportive counseling, intervention/treatment planning*, etc. While those from a mental health background may need more studying in areas such as *infant/very young child development & behavior, developmental guidance*, typically developing *attachment*, etc.

You are encouraged to find study partners or exam mentors to support you during your studies and reflection on your work.

Guidance from Reflective Supervision Provider(s)

You are encouraged to engage your provider of RSC in conversations about your professional journey, capacity for reflection, and understanding of parallel process all in relation to readiness for the exam.

Reference Rating Form

The reference rating form can be used to solicit feedback related to knowledge and skill areas of the Competency Guidelines. PDF versions of reference rating items can be found at <https://www.allianceaimh.org/endorsement-requirements-guidelines>.

If gaps in knowledge or skill areas are identified, you will want to study those areas first. If your provider of RSC expresses reservations related to your capacity to apply I/ECMH principles into practice, you are

encouraged to continue with RSC and on-going assessment of the skills in the domains of *Reflection*, *Thinking*, and *Working with Others*.

Exam Accommodations

If you would like accommodation for either part of the examination, you must submit a written request to the Alliance Exam Coordinator no later than 21 days (3 weeks) before the examination date. The request must detail the kind of accommodation being requested, as well as documentation of the need for accommodation (i.e., an assessment from a professional). The Coordinator will respond to the request at least 10 days before the examination date. The IMH associations of the Alliance are committed to meeting the needs of all members but may not be able to grant every accommodation request. The Alliance Exam Coordinator will work closely with you to develop a plan that offers reasonable accommodation without compromising the integrity of the examination, your identity, or the identity of the Exam Reviewers.

If your primary language is something other than English and you request an accommodation, you can have up to an additional 60 minutes for each section of the exam (i.e., a total of 2 ½ hours for Part One and a total of 2 ½ hours for Part Two). You may also take a dictionary into the examination to assist in translation (e.g., a Spanish to English dictionary). ESL accommodations do not require documentation except for a written request for the standard extension of time outlined above. If more time than the standard extension is requested, further documentation may be required.