



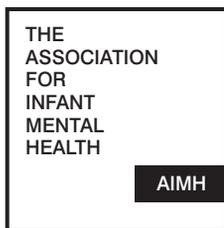
Infant Mental Health Competencies Framework Assessment

4 page folio section

Grid Level 1: Domain 1

Domain 1: Relationship-based practice (10 units)

Relationship-based practice is key to effective infant mental health work. It involves working collaboratively with the family, in order to establish and sustain a respectful, non-judgmental and trusting relationship with them, and having an understanding about barriers to engagement and methods of addressing these. This domain highlights the key aspects of relationship-based practice that are necessary to promote infant mental health.



1.01 - 1.03: Collaborative working.

1.01

Knowledge about the **importance of working collaboratively with the whole family and the significant relationships that have an influence on the infant.**

The ability to use the above knowledge to develop collaborative working practices.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

<input type="checkbox"/> Working towards	Evidence
<input type="checkbox"/> Achieved	



1.01 - 1.03 Collaborative working continued

1.02

Knowledge of the **importance of establishing and being able to sustain a respectful and trusting relationship** (i.e. non-judgmental, supportive and sensitive with the parent/s/caregiver) and to use these relationships in a managed way to bring about change if this is needed.

The ability to use the above knowledge to develop ongoing relationships with families.

Working towards Evidence

Achieved

1.03

Knowledge of the importance of **practitioner/family boundaries** and ability to maintain these both in and outside the work context.

Working towards Evidence

Achieved

1.04 - 1.08: Supporting sensitive caregiving.

1.04

Knowledge about the importance of **sensitive caregiving (e.g. attuned; contingent) and appropriate responsiveness for infant development and to inform work with families.**

The ability to use the above knowledge to inform practice.

Working towards Evidence

Achieved



1.04 - 1.08: Supporting sensitive caring continued

1.05

Knowledge of the importance of **keeping in mind and responding to, the needs of both the parent/s/caregiver and the infant, and the quality and content of the relationship between them.**

Ability to use the above knowledge to interact effectively with both the parent/s/caregiver and the infant.

Working towards Evidence

Achieved

1.06

Knowledge of the **importance of the interaction between the practitioner, the parent, and the infant.**

Ability to use the above knowledge to:

- a) model the provision of sensitive caregiving;
- b) support positive caregiving and identify problems in caregiving;
- c) provide links to other resources that focus on sensitive caregiving.

Working towards Evidence

Achieved

1.07

Knowledge of the importance of **recognising infant verbal and non-verbal behaviour as communication.**

The ability to use the above knowledge to observe, understand and communicate with infants.

Working towards Evidence

Achieved



1.04 - 1.08: Supporting sensitive caring continued

1.08

Knowledge of the importance of **communicating an awareness and appreciation of the baby's feelings.**

The ability to use the above knowledge to communicate sensitively with infants at their level.

Working towards Evidence

Achieved

1.09 - 1.10: Threats to Engagement.

1.09

Knowledge about **possible barriers to and reasons for non-engagement.**

The ability to use the above knowledge to avoid/address/remove barriers to engagement (e.g. providing warm, welcoming environment etc).

Working towards Evidence

Achieved

1.10

Knowledge about **problems with engagement** (i.e. infrequent or sporadic attendance of appointments) and possible reasons for these.

The ability to recognise poor engagement and discuss concerns with colleagues.

Working towards Evidence

Achieved

1.2

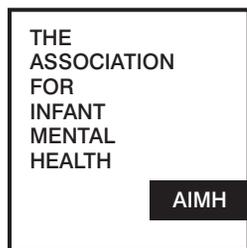
Infant Mental Health Competencies Framework Assessment

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Grid Level 1: Domain 2

Domain 2: Normal and atypical development (13 units)

During pregnancy and the first two years of life, significant brain and physiological development takes place and key aspects of functioning are being established including the ability to regulate emotional states. Domain 2 highlights the key areas of knowledge and skills that are associated relationship-based aspects of practice.



2.01: Brain development and critical periods of development.

2.01

Knowledge that **infant development occurs in the context of significant caregiver-child relationships.**

Ability to use this knowledge to:

- a) interact supportively with parents and build their confidence by describing what is going well;
- b) identify possible concerns and discuss with appropriate colleagues.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

<input type="checkbox"/> Working towards	Evidence
<input type="checkbox"/> Achieved	

1.2

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Assessment

Domain 2:
Normal and atypical
development
(13 units)

2.02 - 2.03: Developmental pathways in infancy

2.02

Knowledge of **age-appropriate developmental milestones during infancy and normal variation compared with more significant divergence from the norm**, in the domains of: social and emotional development; physical development (fine and gross motor skills); language development (receptive and expressive), physical and cognitive development.

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

2.03

Knowledge of the **rapid and environmentally dependent neurobiological development** that occurs in pregnancy and infancy.

Ability to use this knowledge to inform practice by offering appropriate pre and post-natal support/advice and through supporting parents to provide sensitive care.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.2

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Infant Mental
Health Competencies
Framework
Assessment

Domain 2:
Normal and atypical
development
(13 units)

2.04 - 2.07: Attachments

2.04

Knowledge **of the importance of promoting secure infant attachment, and the different types of caregiving behaviours associated with different attachment styles.**

Ability to use this knowledge to:

- a) interact supportively with parents;
- b) identify possible concerns and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

2.05

Knowledge of the importance **of parental reflective functioning.**

Ability to use this knowledge to:

- a) help the parent/s think about their baby as a separate person with feelings and mental processes
- b) identify any possible concerns and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

2.06

Knowledge of **the infant's ability to form a number of key relationships** in addition to the relationship with the primary caregiver.

Ability to use this knowledge to:

- a) interact supportively with parent/s to promote multiple attachment relationships;
- b) identify possible concerns and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.2

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Assessment

Domain 2:
Normal and atypical
development
(13 units)

2.07

Knowledge that the **impact of parent/s/caregiver relationship histories can influence the ways in which they interact with their infant.**

Ability to use this knowledge to:

- a) interact supportively with parent/s in a way that takes account of the parental history to promote optimal parent-infant interaction;
- b) identify possible concerns and discuss with appropriate colleagues.

Working towards Evidence

Achieved

2.08 - 2.10: Ecological context for child development

2.08

Knowledge that **ecological systems can affect family relationships and influence caregiving and infant development.**

Ability to use this knowledge to:

- a) interact supportively with parent/s to promote optimal caregiving;
- b) identify possible concerns and discuss with appropriate colleagues.

Working towards Evidence

Achieved

2.09

Knowledge that **cultural beliefs and practices can impact on caregiving.**

Ability to use the above knowledge to take account of cultural believes and practices.

Working towards Evidence

Achieved

1.2

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Assessment

Domain 2:
Normal and atypical
development
(13 units)

2.10

Knowledge of the **social and economic factors that may impinge on the caregiving relationship.**

Ability to use the above knowledge to identify families in which the above factors may be affecting their parenting and discuss with appropriate colleagues.

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|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

2.11 - 2.13: Resilience

2.11

Knowledge of **environmental/familial factors that promote infant resilience.**

Ability to use the above knowledge to:

- a) support interactions that are favorable to infant development;
- b) identify families in which the above factors may be affecting their parenting and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

2.12

Knowledge of **factors associated with the caregiver's beliefs, feelings and behaviours that promote infant resilience.**

Ability to use the above knowledge to:

- a) support interactions that are favorable to infant development;
- b) to identify families in which the above factors may be affecting their parenting and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.2

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Infant Mental
Health Competencies
Framework
Assessment

Domain 1:
Relationship-based
practice
(10 units)

2.13

Knowledge of **factors associated with the infant (e.g. temperament; prematurity; etc.) that affect infant resilience.**

Ability to use this knowledge to interact supportively with parent/s to promote optimal caregiving.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

End: Infant Mental Health Competencies
Framework Assessment. **Grid Level 1. Domain 2.**

1.3

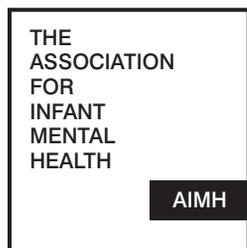
Infant Mental Health Competencies Framework Assessment

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Grid Level 1: Domain 3

Domain 3: Factors that influence caregiving capacity (8 units)

A range of factors have been identified as having an impact on the parents' capacity to parent their baby. Some of these factors can be identified at the level of the individual (e.g. parental mental health problems; parenting skills, parent's experiences of being parented), while other influences involve the family, neighborhood or wider culture. Furthermore, the factors that influence caregiving begin prior to the birth (and even prior to conception) of the baby, and this domain addresses factors operating across the transition to parenthood.



3.01 - 3.03: Transition to parenthood

3.01

Knowledge that the **parent/s/caregiver life experiences and feelings about conception, pregnancy and birth** can impact on their experience of, and behaviour towards, the baby.

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

<input type="checkbox"/> Working towards	Evidence
<input type="checkbox"/> Achieved	

1.3

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Assessment

Domain 3:
Factors that
influence caregiving
capacity
(8 units)

3.02

Knowledge that **emotional and psychological changes occur** for both expectant mothers and fathers when becoming parents (i.e. pregnant and postnatal).

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

3.03

Knowledge that **intrapersonal skills; self-esteem; personal and family history; medical history interpersonal; institutional; and cultural factors** can affect parenting.

Ability to apply above knowledge to practice and consult with colleagues where there are concerns

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

3.04 - 3.07: Ante and postnatal factors that can effect parenting

3.04

Knowledge about the **possible impact of substance misuse (including alcohol), domestic abuse; mental health problems on the development of the foetus/infant and the impact on the parent-infant interaction and relationships.**

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.3

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Health Competencies
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Assessment

Domain 3:
Factors that
influence caregiving
capacity
(8 units)

3.05

Knowledge that **changes in the family and related family dynamics following pregnancy and the birth of a baby can affect the quality of the couple relationship and impact co-parenting.**

Ability to observe and identify emerging difficulties to:

- a) apply the above knowledge to practice;
- b) consult with colleagues where there are concerns.

Working towards Evidence

Achieved

3.06

Knowledge about factors **that may increase vulnerability** in the baby (including prematurity, temperament, genetic syndromes, disability), or **parent's experiences of the baby's characteristics**, and their potential impact on the caregiving relationship and interaction.

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

Working towards Evidence

Achieved

3.07

Knowledge about **mental health problems in parents that can occur to both parents during the pre and postnatal period.**

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

Working towards Evidence

Achieved

1.3

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Infant Mental
Health Competencies
Framework
Assessment

Domain 3:
Factors that
influence caregiving
capacity
(8 units)

3.08 Help seeking behaviours

3.08

An understanding that **social and cultural influences and fear can affect understanding about and attitudes towards the need for, and ability to seek**, help for perinatal mental health difficulties, and that **some parents need to be supported** to access appropriate support.

Ability to apply above knowledge to practice and consult with colleagues where there are concerns.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

End: Infant Mental Health Competencies
Framework Assessment. **Grid Level 1. Domain 3.**

1.4

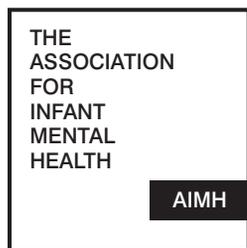
Infant Mental Health Competencies Framework Assessment

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Grid Level 1: Domain 4

Domain 4: Assessment of caregiving (10 units)

Domain 4 focuses on the knowledge and skills needed for effective assessment of the caregiving of infants, both pre and postnatal. Assessment of caregiving is a highly skilled task, and for the better part undertaken using formal assessments as well as practitioner professional judgment. However, adopting an 'observational stance' is key to effective infant mental health practice for all practitioners.



4.01 - 4.06 : Assessment

4.01

Knowledge of the use of observation - from an **observational stance**, of the infant, parent and their interactions, to inform the assessment process and to anchor recommendations.

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.4

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Health Competencies
Framework
Assessment

Domain 4:
Assessment of
caregiving (10
units)

4.02

Knowledge of the importance of conducting **formal assessment using standardised procedures of:**

a) caregiver-infant interaction;

b) infant development (e.g. socio-emotional development; developmental targets).

Working towards Evidence

Achieved

4.03

Knowledge of the **different methods by which formal assessment** can be undertaken (e.g. parent report measures and observational measures).

Working towards Evidence

Achieved

4.04

Knowledge about the role of **information gathering for the purpose of assessment.**

Working towards Evidence

Achieved

4.05

Knowledge about the importance of both **confidentiality and information sharing with other practitioners.**

Ability to use above knowledge to:

a) ensure confidentiality of information about families;

b) appropriate colleagues with whom to share information.

Working towards Evidence

Achieved

1.4

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Framework
Assessment

Domain 4:
Assessment of
caregiving (10
units)

4.06

Knowledge that **one's personal professional viewpoint can effect assessment and may cause bias.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

4.07 - 4.10: Child protection/safeguarding.

4.07

Knowledge of the **possible signs of emotional/physical or sexual abuse and neglect** of the infant including failure to meet developmental and health care needs.

Ability to use this knowledge to identify concerns and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

4.08

Knowledge of the importance of recognising **caregiver behaviours that may be associated with abuse or neglect.**

Ability to use the above knowledge to identify possible concerns and discuss with appropriate colleagues.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.4

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Grid Level 1
Infant Mental
Health Competencies
Framework
Assessment

Domain 4:
Assessment of
caregiving (10
units)

4.09

Knowledge about the **impact of abuse during infancy on short, medium and long-term development.**

Ability to use this knowledge to inform practice.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

4.10

Knowledge about the importance of **prioritizing the infant's welfare to promote their safety.**

Ability to use this knowledge to inform practice.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

End: Infant Mental Health Competencies
Framework Assessment. **Grid Level 1. Domain 4.**

1.5

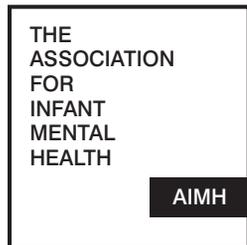
Infant Mental Health Competencies Framework Assessment

3 page folio section

Grid Level 1: Domain 5

Domain 5: Supporting Caregiving (7 units)

Domain five addresses the knowledge and skills that are required to work effectively to both support caregiving and to work with parent/s-infant dyads who may be experiencing difficulties. One of the key features of effective interventions to improve caregiving involves working with the caregiver/s/parent/s and infant together.



5.01

Knowledge that there are **different kinds of support that can be provided to families during the pre and postnatal** period to promote infant mental health (e.g. primary; secondary; tertiary)

Ability to use the above knowledge to inform practice.

Working towards Evidence

Achieved

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

1.5

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Assessment

Domain 5:
Supporting
Caregiving
(7 units)

5.02

Knowledge that there are **different types of intervention that can be provided** in terms of the focus of the intervention (e.g. infant; parent; dyad; triad etc).

Ability to use the above knowledge to inform practice.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

5.03

Knowledge that the different level and type of support that is provided is determined by an **assessment of need**.

Ability to use the above knowledge to inform practice.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> | |

5.04

Knowledge that all support/intervention should be **socially/culturally acceptable and inclusive of all families**.

Ability to use the above knowledge to inform practice.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.5

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Grid Level 1
Infant Mental
Health Competencies
Framework
Assessment

Domain 5:
Supporting
Caregiving
(7 units)

5.05

Knowledge that the benefit or otherwise of all support/intervention **should be assessed**.

Ability to use the above knowledge to inform practice.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

5.06

Knowledge that the best model of working with parent/s/caregivers **to promote infant mental health should focus on the factors that improve the quality of the relationship and interactions between caregiver and infant** (e.g. parental sensitivity; mindfulness etc).

Ability to use the above knowledge to inform practice.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

5.07

Knowledge that effective support/intervention may involve a “team around the child” approach with other practitioners.

Ability to use the above knowledge to inform practice

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|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

End: Infant Mental Health Competencies Framework Assessment. **Grid Level 1. Domain 5.**

1.6

Infant Mental Health Competencies Framework Assessment

3 page folio section

Grid Level 1: Domain 6

Domain 6: Reflective practice and supervision (6 units)

Domain 6 highlights the key aspects of reflective practice and is underpinned by a recognition that work in this field can be emotionally challenging and arouse conflicting feelings about one's own past or present experiences and relationships. Reflective practice involves the ability to reflect and review one's practice and undertake self-appraisal, both of which are core to effective infant mental health practice. It also involves supervision, and ongoing continuing professional development.



6.01 - 6.06: Reflecting practice principles.

6.01

Knowledge of the importance of the ability to **work reflectively and of self-appraisal for infant mental health work.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

Working towards

Evidence

Achieved

1.6

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Assessment

Domain 6:
Reflective practice
and supervision
(6 units)

6.02

Knowledge of the importance of **supervision and that it is a core component of reflective practice.**

Ability to engage with supervision where this is provided.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

6.03

Knowledge of the importance of **maintaining and updating skills and knowledge relating to infant mental health.**

Ability to use the above knowledge to undertake both informal and formal updating of knowledge and skills.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

6.04

Knowledge of the importance for practitioners to **recognise and respond to issues that threaten their own fitness to practise in the field of infant mental health**, as well the fitness to practise of professional colleagues.

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.6

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Health Competencies
Framework
Assessment

Domain 6:
Reflective practice
and supervision
(6 units)

6.05

Knowledge of the importance of practitioners **representing accurately their professional qualifications, knowledge, skills and experience.**

Working towards Evidence

Achieved

6.06

Knowledge of the importance of **working collaboratively** with colleagues in the multi-disciplinary team so that **shared understanding of the infant's wellbeing** in the family can be sought.

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

Working towards Evidence

Achieved

End: Infant Mental Health Competencies
Framework Assessment. **Grid Level 1. Domain 6.**

1.7

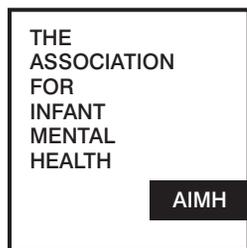
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4 page folio section

Grid Level 1: Domain 7

Domain 7: Working within relevant legal and professional frameworks (9 units)

Domain 7 highlights some of the relevant legal and professional requirements that are specific to effective infant mental health practice



7.01 - 7.06: Knowledge of relevant legislation.

7.01

Knowledge about **relevant legislation and guidelines** that apply to **work with infants/children and their families** and the settings in which they are seen.

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practise document.

Working towards

Evidence

Achieved

1.7

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Grid Level 1
Infant Mental
Health Competencies
Framework
Assessment

Domain 7:
Working within
relevant legal and
professional
frameworks
(9 units)

7.02

Knowledge about **legislation and guidance relating to the protection of infants and children.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

7.03

Knowledge about the importance of drawing on **national, local and organisational child protection standards, policies and procedures** to protect infants and children.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

7.04

Knowledge about the importance of promptly **responding to concerns about infant/child protection.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.7

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Infant Mental
Health Competencies
Framework
Assessment

Domain 7:
Working within
relevant legal and
professional
frameworks
(9 units)

7.05

Knowledge about the importance of promptly **seeking advice and supervision in relation to child protection concerns.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

7.06

Knowledge about the **importance of the risk of harm being continuously reviewed unless there are good reasons for this not to occur** and that concerns about child protection may re-emerge.

Ability to use the above knowledge to inform practice and discuss concerns with appropriate colleagues.

- | | |
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| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

7.07 - 7.09: Information sharing.

7.07

Knowledge of the importance that **parent/s/caregivers are involved in decisions about sharing information.**

Ability to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

- | | |
|--|----------|
| <input type="checkbox"/> Working towards | Evidence |
| <input type="checkbox"/> Achieved | |

1.7

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Grid Level 1
Infant Mental
Health Competencies
Framework
Assessment

Domain 7:
Working within
relevant legal and
professional
frameworks
(9 units)

7.08

Knowledge of the importance of **listening to the parent/s/caregiver responses**.

Ability to use the above knowledge to inform practice.

Working towards Evidence

Achieved

7.09

Knowledge of the importance of using assessment information to **inform a shared plan for working collaboratively with the family** to support their parenting of the infant.

Ability to use the above knowledge to inform practice.

Working towards Evidence

Achieved

End: Grid Level 1.

Infant Mental Health Competencies Framework Assessment.