2.1 Infant Mental Health Competencies Framework Assessment

Grid Level 2: 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
Ability to apply the knowledge about the importance of working collaboratively with the whole family and the significant relationships that have an influence on the infant to:
   a) inform delivery of collaboratively based services to families;
   b) inform working practise with colleagues and wider services;
   c) model such working with other practitioners.

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
- Achieved

Evidence
1.02
Ability to apply the knowledge about the importance of establishing and being able to sustain respectful and trusting relationships with the parent/s/caregiver and to use these relationships in a managed way to bring about change if this is needed to:
   a) inform engagement and delivery of services to families;
   b) inform wider working practice with colleagues and wider services;
   c) model such working to other practitioners.

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1.03
Ability to apply the knowledge about the importance of professional boundaries and ability to maintain these to:
   a) establish appropriate boundaries;
   b) support level 1 practitioners to establish appropriate boundaries.

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1.04 - 1.08 Supporting sensitive caregiving

1.04
Ability to apply the knowledge about the importance of sensitive caregiving (e.g. attuned; contingent) and appropriate responsiveness for infant development to inform all work with families.

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1.05
Ability to apply the 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 in terms of all forms of assessment and support being provided.

- Working towards
- Achieved

1.06
Ability to apply the knowledge about the importance of sensitive caregiving to:
- model the provision of sensitive caregiving;
- support positive caregiving and identify problems in caregiving;
- provide links to other resources that focus on sensitive caregiving;
- provide appropriate dyadic/triadic support to address problems;
- liaise with other professionals;
- recognise when referral on to specialist services is needed.

- Working towards
- Achieved

1.07
Ability to apply the knowledge about the importance of recognising infant behaviour as communication to:
- observe and identify what is going well for the baby and highlight the parent’s role in this;
- sensitively and respectfully model optimal communication with the infant;
- model the provision of sensitive caregiving;
- identify problems in caregiving;
- provide links to other resources that focus on sensitive caregiving;
- provide appropriate dyadic support to address problems;
- liaise with other professionals;
- refer on to specialist services where necessary.

- Working towards
- Achieved
1.08
Ability to apply the knowledge about the importance of communicating an awareness and appreciation of the baby’s feelings to:
   a) model optimal communication with the infant;
   b) model the provision of sensitive caregiving;
   c) identify problems in caregiving;
   d) provide links to other resources that focus on sensitive caregiving;
   e) provide appropriate dyadic/triadic support to address problems;
   f) liaise with other professionals;
   g) refer on to specialist services where necessary.

☐ Working towards ☐ Achieved

1.09 - 1.10 Threats to engagement

1.09
Ability to apply the knowledge about possible barriers to and reasons for non-engagement to:
   a) promote an environment that will encourage engagement;
   b) identify and address factors that are threatening engagement.
1.10
Ability to apply the knowledge about problems with engagement and possible reasons for these to:

a) discuss concerns with parent/s/carer;
b) provide alternative methods of promoting engagement (e.g. alternative venues; text reminders etc.);
c) provide alternative methods of support (e.g. online tools);
d) to follow safeguarding procedures.

☐ Working towards  Evidence
☐ Achieved

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

Ability to apply the knowledge that infant development occurs in the context of significant caregiver-child relationships to:

a) discuss these issues with parent/s/caregivers;

b) provide links to other resources;

c) liaise with other practitioners regarding concerns;

d) provide support to families to promote caregiver-child relationship.

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2.02 - 2.03: Developmental pathways in infancy

2.02
Ability to apply the knowledge and perform a standardized developmental check of age-appropriate developmental milestones during infancy and normal variation compared with more significant divergence from the norm, in the domains of:
   a) social and emotional development;
   b) physical development (fine and gross motor skills);
   c) language development (receptive and expressive);
   d) cognitive development;
   e) ability to share the results in a sensitive way with the parent/s.

Use this knowledge to:
   a) support optimal development;
   b) identify problems in these developmental domains;
   c) discuss concerns with parents;
   d) liaise with other practitioners;
   e) know when to make referrals to other services.

☐ Working towards Evidence
☐ Achieved

2.03
Ability to apply the knowledge about the rapid and environmentally-dependent neurobiological development that occurs in pregnancy and infancy to:
   a) discuss these issues with parents;
   b) provide links to relevant resources;
   c) inform their delivery of support during the perinatal period;
   d) support parents to provide sensitive care;
   e) know when to make appropriate referrals to other services.

☐ Working towards Evidence
☐ Achieved
### 2.04 - 2.07: Attachments

#### 2.04
Ability to apply the knowledge **about the importance of promoting secure infant attachment, and the different types of caregiving behaviours associated with different attachment classification** to:

- a) discuss issues relating to interaction with parents;
- b) identify problems at the level of the parent or infant using or guided by a recognised tool (e.g. parent report or observational);
- c) provide links to other resources;
- d) provide support to parents experiencing problems via group or individual work;
- e) make referrals to appropriate specialist services.

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#### 2.05
Ability to apply the knowledge **about the importance of parental reflective functioning** to:

- a) model reflective interactions with the parent and infant;
- b) identify problems with parental reflective functioning;
- c) provide support that will promote mind-mindedness;
- d) know when to make referrals to appropriate specialist services.

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2.06
Ability to apply the knowledge about the infant’s ability to form a number of significant relationships in addition to the relationship with the primary caregiver to:
- a) reflect with parent/s on opportunities to promote other attachments;
- b) provide links to relevant resources;
- c) liaise with other practitioners where there are concerns;
- d) know when to make referrals to appropriate specialist service.

☐ Working towards ☐ Achieved

2.07
Ability to apply the knowledge about the impact of parent/s/caregiver relationship histories, and the way in which this can unconsciously impact on their interactions with the infant to:
- a) reflect with parent/s on the way in which such patterns may be influencing their caregiving;
- b) provide links to relevant resources;
- c) liaise with other practitioners where there are concerns;
- d) know make referrals to appropriate specialist services.

☐ Working towards ☐ Achieved

2.08 - 2.10: Ecological context for child development

2.08
Ability to apply the knowledge that ecological systems can affect family relationships and influence caregiving and infant development.

☐ Working towards ☐ Achieved
### 2.09
Ability to apply the knowledge that **cultural beliefs and practices will impact on caregiving** to:

- a) adapt practice and delivery of services to recognise cultural differences;
- b) identify appropriate and inappropriate cultural variations to parenting and discuss with parent/s or other colleagues as appropriate.

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### 2.10
Ability to apply the knowledge about the **social and economic factors that may impinge on the caregiving relationship** to:

- a) assess the specific impact of such factors on parenting;
- b) support families to obtain appropriate additional help to relieve their circumstances;
- c) provide support to parent/s whose parenting is affected as a consequence of their circumstances;
- d) make referrals to appropriate specialist services.

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### 2.11 - 2.13: Resilience

### 2.11
Ability to apply the knowledge about **environmental/familial factors that promote infant resilience** to:

- a) discuss with parent/s in order to buffer the infant from environmental impingements;
- b) identify families who may need additional support;
- c) provide links to other resources;
- d) provide additional support if required.

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2.12
Ability to apply the knowledge about factors associated with the caregiver’s beliefs, feelings and behaviours that promote infant resilience to:
   a) discuss with parent/s in order to promote optimal caretaking;
   b) identify caregivers who may need additional support;
   c) provide links to other resources;
   d) provide additional support if required.

☐ Working towards Evidence
☐ Achieved

2.13
Ability to apply the knowledge about factors associated with the infant that contribute to infant resilience to:
   a) discuss with parent/s in order to promote optimal caretaking;
   b) identify infants who may need additional support;
   c) provide links to other resources;
   d) provide additional support if required.

☐ Working towards Evidence
☐ Achieved

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

Ability to apply the knowledge about parent/s/caregiver life experiences and feelings about conception, pregnancy and birth to:

- a) discuss these issues with the family;
- b) provide links to relevant resources;
- c) inform their delivery of support during the perinatal period;
- d) signpost families or refer, where applicable, to appropriate sources of support/services.

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Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practice document.
3.02
Ability to apply the knowledge about the emotional and psychological changes that can occur to:

a) conduct an Antenatal Promotional Interview;
b) deliver a standardized preparation for parenthood programme;
c) provide a preventive mental health intervention.

☐ Working towards
☐ Achieved

3.03
Ability to apply the knowledge that a range of factors can affect parenting and to work preventively by assessing:

a) whether and in what way parenting is being affected by these factors;
b) discuss with the parent/s the possible impact of these factors on their parenting;
c) support parent/s by signposting to relevant services;
d) know when to make referral to specialist services.

☐ Working towards
☐ Achieved
3.04 - 3.07: Ante and postnatal factors that can effect parenting

3.04
Ability to apply the knowledge about 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 to:
   a) discuss issues related to substance misuse and domestic abuse with parent/s;
   b) assess the interaction using a standardized tool;
   c) provide appropriate dyadic support to the parent and infant to meet any identified problems;
   d) know when to refer on to other specialist service.

☐ Working towards ☐ Achieved

3.05
Ability to apply the knowledge that changes in the family constellation and dynamics following pregnancy and the birth of a baby can affect the quality of the couple relationship and impact co-parenting to:
   a) discuss issues relating to co-parenting with the parents;
   b) support parents by signposting to relevant services;
   c) know when to make a referral to specialist services

☐ Working towards ☐ Achieved

Domain 3/Folio 3
3.06 Ability to apply the knowledge about **dispositional factors and regulatory disorders and baby characteristics that may increase vulnerability** in the baby and their impact on the caregiving relationship to:

   a) discuss these issues with the parent/s;
   b) assess the interaction using a standardized tool;
   c) provide appropriate support for moderate interactional problems;
   d) provide links to other resources;
   e) know whether to make referrals to specialist services.

- Working towards
- Achieved

3.07 Ability to apply the knowledge about **mental health problems that can occur to both parents during the pre and postnatal period** to:

   a) screen for common mental health problems, where appropriate;
   b) signpost to or provide support in the case of mild common mental health problems; (e.g. online or one-to-one);
   c) provide support to women experiencing mild common mental health problems;
   d) know when to make contact with specialist services for consultation and liaison/co-working as well as referral for more severe problems.

- Working towards
- Achieved
3.08 Help seeking behaviours

3.08
Ability to apply the knowledge about the relevant personal, social and cultural factors and fear influencing parental understanding of and attitudes toward help-seeking for, perinatal mental health difficulties to:

a) assess how these factors may be impacting on the social and emotional health, safety and child development within individual families;

b) discuss barriers with parent/s and provide support.

☐ Working towards Evidence
☐ Achieved

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

Ability to apply the knowledge about routinely adopting an observational stance to:

a) observe the parent/s/caregiver interaction non-judgmentally and to support growth enhancing interaction;
b) to identify areas of concern;
c) provide appropriate interventions when interactions are detrimental to the baby’s development;
d) be able to recognise when referral to specialist services is necessary and take appropriate action.

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

- Working towards
- Evidence
- Achieved

Domain 4/Folio 1
4.02
Ability to apply the knowledge about the importance of conducting **formal assessment** of:

a) **the caregiver-infant interaction**;

b) **infant development** to undertake assessments of both (a) and (b) using appropriate tools;

c) identify areas of concern and appropriate actions to take.

☐ Working towards

☐ Achieved

4.03
Ability to apply the knowledge about the **different methods by which formal assessment** can be undertaken and to use **standardised** assessment methods.

☐ Working towards

☐ Achieved

4.04
Ability to apply the knowledge about the role of **information gathering for the purpose of assessment** in order to:

a) undertake such information gathering with parent/s and other practitioners.

☐ Working towards

☐ Achieved
4.05
Ability to apply the knowledge about the **importance of both confidentiality and information sharing with other practitioners** to:
   a) balance the interests of the infant and family in relation to keeping information confidential versus sharing information;
   b) inform decisions about information sharing with individuals and organisations beyond the immediate work environment of the practitioner.

☐ Working towards          Evidence
☐ Achieved

4.06
Ability to apply the knowledge that **one’s personal professional viewpoint can affect assessment and may be a cause of bias**.

Ability to use this knowledge to reflect on one’s practice and discuss difficulties with appropriate colleagues/supervisor/manager.

☐ Working towards          Evidence
☐ Achieved

4.07 - 4.10: Child protection/safeguarding.

4.07
Ability to apply the knowledge about the **possible signs of emotional/physical or sexual abuse and neglect** of the infant including failure to meet developmental and health care needs to:
   a) discuss concerns with parent/s/caregivers;
   b) undertake further assessment;
   c) provide support to address concerns;
   d) liaise with and provide assessment information to child protection services where appropriate.

☐ Working towards          Evidence
☐ Achieved
### Domain 4: Assessment of caregiving (10 units)

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<th>4.08</th>
<th>Ability to apply the knowledge about the importance of recognising <strong>caregiver behaviours that may be associated with abuse or neglect</strong> to:</th>
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<td>a) discuss concerns with parent/s/caregivers;</td>
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<td>b) undertake further assessment;</td>
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<td>c) provide support to add concerns;</td>
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|      | d) liaise with and provide assessment information to child protection services where appropriate. |}

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<th>4.09</th>
<th>Ability to apply the knowledge about the <strong>impact of abuse during infancy on short, medium and long-term development</strong> to support practitioners working at Level 1.</th>
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<th>4.10</th>
<th>Ability to apply the knowledge about the importance of <strong>prioritizing the infant/child welfare to promote their safety</strong> at all times and support practitioners working at Level 1.</th>
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□ **End**: Infant Mental Health Competencies Framework Assessment. **Grid Level 2. Domain 4.**
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.

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<th>5.01</th>
<th>Ability to apply the knowledge that there are different levels of support that can be provided to families during the pre and postnatal period to:</th>
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<td>a) promote infant mental health (e.g. primary; secondary; tertiary) to know when and how to intervene to provide appropriate support, and when to refer to more specialist services;</td>
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<td>b) have awareness of local agencies and pathways/networks relevant to promotion and treatment of IMH/Perinatal MH problems.</td>
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Domain 5/Folio 1
5.02
Ability to apply the 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.) to inform provision of services appropriately to:
   a) identify the foci of difficulty in the family
   b) identify the members of the family who need support
   c) discuss with the family which type of support and for whom would be appropriate for them.

☐ Working towards Evidence
☐ Achieved

5.03
Ability to apply the knowledge that the different level and type of support that is provided is determined by an assessment of need to:
   a) conduct assessment of need using appropriate tools;
   b) use the outcomes of the assessment of need to identify appropriate intervention;
   c) know when to refer to specialist services.

☐ Working towards Evidence
☐ Achieved

5.04
Ability to apply the knowledge that all support/intervention should be socially/culturally acceptable to families to:
   a) adapt the available support/interventions as appropriate.

☐ Working towards Evidence
☐ Achieved
5.05
Ability to apply the knowledge that the benefit or otherwise of all support/intervention should be assessed to undertake appropriate further intervention.

☐ Working towards | Evidence
☐ Achieved

5.06
Ability to apply the knowledge that the best model of working with parent/s/caregivers to promote infant mental health should focus on the factors that promote optimal mental health (e.g. parental sensitivity; reflective functioning etc.) and application of this knowledge to determine the most appropriate method of support/intervention.

☐ Working towards | Evidence
☐ Achieved

5.07
Ability to apply the knowledge that effective support/intervention may involve a “team around the child” approach with other practitioners and application of this to undertake appropriate liaison.

☐ Working towards | Evidence
☐ Achieved

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
Ability to apply the knowledge of the importance of the ability to work reflectively and of self-appraisal for infant mental health work to:

- a) be a reflective practitioner;
- b) maintain a reflective working environment;
- c) oversee appraisal of level 1 staff.

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

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Domain 6/Folio 1
6.02
Ability to apply the knowledge of the importance of *supervision and that it is a core component of reflective practice* to:
- a) enhance the quality of the service that clients receive;
- b) use supervision to discuss the personal impact of the work on the practitioner;
- c) reflect on supervisors' feedback and apply reflections to future work and to continue professional development;
- d) provide supervision to Level 1 practitioners.

☐ Working towards Evidence

☐ Achieved

6.03
Ability to apply the knowledge of the importance of *maintaining and updating skills and knowledge* relating to infant mental health to:
- a) undertake continuing professional development;
- b) provide continuing professional development and supervision of level 1 practitioners.

☐ Working towards Evidence

☐ Achieved

6.04
Ability to apply the knowledge of the importance for practitioners to *recognise and respond to issues that threaten their own fitness to practice* in the field of infant mental health, as well as the fitness to practice of professional colleagues. To be able to: discuss with/consult/ self-report /report to appropriate colleagues/employers/education providers.

☐ Working towards Evidence

☐ Achieved

Domain 6/Folio 2
6.05
Knowledge of the importance of practitioners knowing the areas in which they are qualified and able to work and the limitations to this.

☐ Working towards

☐ Achieved

6.06
Ability to apply the knowledge about the importance of **working collaboratively** with colleagues in the multi-disciplinary team to ensure the development of a coordinated and economic professional environment around the infant and family.

Ability to seek help when there is conflict within the network.

☐ Working towards

☐ Achieved

☐ End: Infant Mental Health Competencies Framework Assessment. **Grid Level 2. Domain 6.**
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

Ability to apply the knowledge of relevant legislation and guidelines that apply to “best practice” with infants/children and their families and the settings in which they are seen to ensure the safety of infants/children.

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Please use the grid opposite to self-assess your skills, knowledge and behaviours against each individual competence throughout the relationship-based practice document.
2.7

7.02
Ability to apply the knowledge of **legislation and guidance relating to the protection of infants/children** to use the above knowledge to identify possible problems and discuss with appropriate colleagues.

☐ Working towards Evidence

☐ Achieved

7.03
Ability to apply the knowledge about the importance of drawing on **national, local and organisational child protection standards, policies and procedures** to protect infants/children.

☐ Working towards Evidence

☐ Achieved

7.04
Ability to apply the knowledge about the importance of promptly responding to concerns about infant/child protection to:

a) discuss concerns with parent/s/caregivers;
b) undertake further assessment;
c) provide support to address concerns;
d) liaise with and provide assessment information to child protection services where appropriate.

☐ Working towards Evidence

☐ Achieved

Domain 7/Folio 2
7.05
Knowledge about the importance of promptly seeking advice and supervision in relation to child protection concerns.

☐ Working towards  Evidence  
☐ Achieved

7.06
Ability to apply the 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 to:
   a) create a working environment in which this may be realised.

☐ Working towards  Evidence
☐ Achieved

7.07 - 7.09: Information sharing

7.07
Ability to apply the knowledge about the importance that parent/s/caregivers are involved in decisions about sharing information to:
   a) provide appropriate opportunities for sharing of information.

☐ Working towards  Evidence
☐ Achieved
7.08
Ability to apply the knowledge about the importance of **listening to the parent/s/caregiver responses** to:
   a) ensure effective opportunities for such feedback at individual and service level.

☐ Working towards  
☐ Achieved

7.09
Ability to apply the knowledge of the importance of using assessment information to **inform a shared plan for working collaboratively with the family** to:
   a) support their parenting of the infant  
   b) develop a shared plan and work collaboratively with parents to achieve its goals.

☐ Working towards  
☐ Achieved

☐ End: Grid Level 2.
Infant Mental Health Competencies Framework Assessment.