What to know About the Endorsement® Exam

This document is intended to be used to explain the Endorsement® exam for Infant Mental Health Specialists and Infant Mental Health Mentors.

The exam has two parts, both are based on the Competency Guidelines®. The competencies are divided into domains, referred to below. The Competency Guidelines® will be an important reference in preparing for the exam.

Part One: Multiple Choice

- A majority of the multiple-choice questions will be focused on the competency areas found under the Theoretical Foundations and Direct Service Skills domains found within the Competency Guidelines®.
- The Theoretical Foundations and Direct Service Skill domains address an exam respondent’s IMH knowledge specific to work with infants (0-36 months) and their families.
- Within Theoretical Foundations, there will be more questions from the areas of infant/young child development & behavior; attachment, separation, trauma grief, & loss; and disorders of infancy/early childhood.
- Within Direct Service Skills, there may be more from screening & assessment and parent-infant/very young child relationship-based therapies & practices.
- Most questions will be related to direct service, but there will be some questions related to reflective supervision/consultation, policy, and research.
- The multiple-choice section is the same for all exam respondents: Infant Mental Health Specialist (IMHS), Infant Mental Health Mentor-Clinical (IMHM-C), Infant Mental Health Mentor-Policy (IMHM-P), Infant Mental Health Mentor-Research/Faculty (IMHM-R/F).
- 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

- This section is intended to measure the applicant’s capacity to apply his/her knowledge of IMH principles and concepts into practice and to demonstrate a reflective, relationship-based approach.
- While all of the competency areas are important, the ones under the Reflection, Thinking, and Working with Others domains are important to the qualitative section for IMHS and IMHM-C exam respondents.
- Knowledge/skills gained through receiving reflective supervision/consultation (RSC) about direct service experiences (for IMHS and IMHM-C exam respondents)
and about the RSC provided to others (for IMHM-C exam respondents) will be most useful in this section of the exam.

- The competencies found under Administration will be the primary focus of the IMHM-P exam
- The competencies found under Research & Evaluation will be the primary focus of the IMHM-R/F exam

Preparation

*Please do not feel as though you need to wait to begin studying for the Endorsement® exam until you receive the results of your application review. We encourage people to begin studying as soon as they decide that they hope to sit for an upcoming exam.*

**Self-assessment:** Applicants can refer back to the *Getting Started Guide* and/or feedback received about the review of their applications to identify areas where additional study may be useful. When considering the specialized in-service trainings, it is important to note that training series that occur over time and include opportunities for reflective discussion offer better preparation for the qualitative section of the exam than “one and done” training sessions.

One’s disciplinary background may also provide guidance, i.e., applicants who come from a background that emphasizes development may find they require more studying related to mental health competencies like *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. The indexed list of resources at [mi-aimh.org/endorsement/endorsement-exam/](mi-aimh.org/endorsement/endorsement-exam/) can be used to find readings specific to the knowledge/skill area where more study is needed.

**Guidance from provider(s) of RSC for IMHS and IMHM-C:** Applicants are encouraged to engage their provider of RSC in conversations about the applicant’s professional journey, capacity for reflection, and understanding of parallel process all in relation to readiness for the exam. The paper version of the reference rating form can be used to solicit feedback related to knowledge and skill areas of the competencies. The pdf lists of reference rating items can be found at [mi-aimh.org/endorsement/reflective-supervision-consultation/tips-regarding-reference-ratings/](mi-aimh.org/endorsement/reflective-supervision-consultation/tips-regarding-reference-ratings/). If gaps in knowledge are identified, the indexed list of resources at [mi-aimh.org/endorsement/endorsement-exam/](mi-aimh.org/endorsement/endorsement-exam/) can be used to identify readings. If the provider of RSC expresses reservations related to the capacity to apply IMH principles into practice, the applicant is encouraged to continue with RSC and the on-going assessment of skills in the areas of Reflection, Thinking, and Working with Others.

**Study:** In addition to the selection of readings from the list of resources (see link above), applicants are encouraged to review the notes, slides, and materials from the specialized in-service trainings in which they have participated.
Detailed breakdown of each type of Endorsement® exam:

**Infant Mental Health Specialist**

Part One – 90 minutes to answer to 60 multiple-choice questions
- Paper & pencil; questions read from a printed document, answers marked onto a separate answer sheet
- 80% or better is required to pass (no more than 12 incorrect answers)

Part Two – 90 minutes to respond to two of three vignettes related to direct service
- Vignettes are available as a hard copy and on a flash drive as a Word document
- Flash drive is inserted into a computer and responses are typed directly into the Word document, saved, and printed

**Infant Mental Health Mentor – Clinical**

Part One – 90 minutes to answer to 60 multiple-choice questions
- Paper & pencil; questions read from a printed document, answers marked onto a separate answer sheet
- 80% or better is required to pass (no more than 12 incorrect answers)

Part Two – 90 minutes to respond to two of three vignettes
- One vignette is about the provision of reflective supervision/consultation and must be answered from the perspective of the supervisor/consultant
- One of two direct service vignettes must be answered from the perspective of the infant mental health specialist/practitioner
- Vignettes are available as a hard copy and on a flash drive as a Word document
- Flash drive is inserted into a computer and responses are typed directly into the Word document, saved, and printed

**Infant Mental Health Mentor – Policy**

Part One – 90 minutes to answer to 60 multiple-choice questions
- Paper & pencil; questions read from a printed document, answers marked onto a separate answer sheet
- 80% or better is required to pass (no more than 12 incorrect answers)

Part Two – 90 minutes to respond to one of two scenarios
- Scenarios will ask for a demonstration of leadership in the infant-family field ensuring the promotion and practice of infant mental health through knowledge of
  - Funding
  - Systems development
  - All that is required to promote change across systems
- Scenarios are available as a hard copy and on a flash drive as a Word document
- Flash drive is inserted into a computer and responses are typed directly into the Word document, saved, and printed
Infant Mental Health Mentor – Research/Faculty

Part One – 90 minutes to answer 60 multiple-choice questions
- Paper & pencil; questions read from a printed document, answers marked onto a separate answer sheet
- 80% or better is required to pass (no more than 12 incorrect answers)

Part Two – 90 minutes to respond to one of two scenarios
- One scenario will be related to the role of teaching
- The other scenario will be related to conducting research
- Topics may include the study of pregnancy, infancy, early childhood and early parenthood; attachment security and relationship needs; risk and resiliency in the early years; caregiving practices; early assessment and intervention strategies, and the mental health needs of infants & toddlers
- Scenarios are available as a hard copy and on a flash drive as a Word document
- Flash drive is inserted into a computer and responses are typed directly into the Word document, saved, and printed