

Snapshot: Highlights of Workforce Development – University of California, San Francisco (UCSF), Infant-Parent Program (Targeted IECMHC Program)

Program Overview

Mental health consultation as developed and practiced since 1987 by the UCSF Infant-Parent Program is dynamically informed, relationally focused, and long term. The trauma and culturally informed consultation services are aimed at building capacity (individual and systemic) and supporting the abilities of parents and providers to understand and respond to the needs of the young children in their care. The approach aims to strengthen relationships at both a systems level and an individual level to support families and young children (parallel process).

The UCSF Infant-Parent Program offers a yearlong multidisciplinary and intensive practice-based training program in mental health consultation to newly hired staff and graduate student interns (pre-docs, post-docs, and master's level), which includes Infant and Early Childhood Mental Health Consultation (IECMHC) training. Interns commit 20 hours a week and are assigned two to three early care and education (ECE) programs. Because of their time-limited involvement and new status in the work, consultant trainees are assigned to centers where concerns focus on individual children and families, rather than broader programmatic functioning.

Staffing Qualifications

Mental health consultants must have the following knowledge and experience:

- ◆ Knowledge of infant, toddler, and preschool development
- ◆ Knowledge of and (preferably) experience in early childhood education and/or group settings for children
- ◆ Knowledge of systems and organizational functioning
- ◆ Experience with assessment of young children's social and emotional functioning
- ◆ Experience with and/or knowledge of group dynamics and interventions with adults
- ◆ Clinical experience or expertise in relational interventions with children up to 6 years of age
- ◆ Experience with or knowledge of working with families and systems impacted by trauma
- ◆ Awareness of and sensitivity to issues of racism, equity, diversity, and multiculturalism in the settings in which IECMHC services are provided

In addition:

- ◆ Consultation is provided by masters-level mental health clinicians in social work, clinical psychology, or a related discipline.
- ◆ At the time of hire, all consultants have at least three years of post-master's experience.
- ◆ Staff consultants are licensed or license-eligible. Exceptions are made when an applicant possesses significant and relevant experience in a field that is not license-eligible (i.e., a master's in Clinical Infant Studies).

Consultants must also possess the following traits and characteristics:

- ◆ Self-awareness
- ◆ Flexibility
- ◆ Reflective capacity
- ◆ Patience
- ◆ Hopefulness
- ◆ Interpersonal receptivity
- ◆ A commitment to social justice and equity

Note: Our program believes in investing in, supporting, and training clinicians who are representative of the communities served by our IECMHC services.

Supervisors of IECMH consultants have at least 5 years of post-master's experience and at least 10 years of experience in providing IECMHC. All supervisors continue to provide consultation while supervising.

Training

The specialization of IECMHC is conceptually rooted in the fields of professional consultation, mental health, and infant mental health. Thus, training focuses on these areas of knowledge. Training topics include the following:

- ◆ The consultative stance, and its distinction from comportment and parameters of involvement in direct mental health treatment
- ◆ The role of the consultant



- ◆ Understanding the context and culture of the early childhood setting in which consultation is provided
- ◆ Establishing the consultative relationship
- ◆ Infant, toddler, and preschool development—normative and atypical
- ◆ Child and program observation
- ◆ Classroom-based consultation
- ◆ Child-focused consultation
- ◆ Consultation with program directors and administrators
- ◆ Understanding children’s behaviors
- ◆ Translating behavior/action into meaning
- ◆ Self-regulation, sensory processing, and sensory integration
- ◆ Attachment Theory and attachment relationships in the context of group care
- ◆ Working with community partners and coaches
- ◆ IECMHC in other settings, including shelters, family resource centers, and residential programs
- ◆ Consultant sustainability and compassion fatigue
- ◆ Reflective practice and use of self-learning
- ◆ How to develop a relational and organizationally informed clinical conceptualization

Training topics are delivered in a discussion-based format, encouraging reflection and the application of content to clinical practice. Topics are discussed within a trauma-, diversity-, and equity-informed perspective. Training is provided to both new staff and interns in a yearlong weekly seminar with embedded or additional case review; the frequency may shift, based on the needs of the program (units of service, etc.) and the size of the training cohort.

In addition to the training forum focused specifically on the Infant-Parent Program’s consultative approach, interns participate in a second weekly seminar that addresses aspects of typical and atypical early development.



The orientation phase of training for both interns and new staff extends over the first several months. It begins with opportunities to observe in a range of ECE settings, preceded and followed by meetings with the consultant whose site was observed. The consultant in training is asked to consider some orienting questions to guide the observations. The purpose of this experience is twofold:

- ◆ Observing in a range of sites offers opportunities to witness differences in quality, philosophy, size, and cultural and ethnic makeup across settings.
- ◆ The latitude afforded by observing in a setting where the consultant in training does not hold responsibility allows him or her to reflect on the role without having to act.

Consultants in training also shadow experienced mental health consultants as part of the orientation phase.

After the first year of formal training, staff consultants have opportunities for continued training through a monthly case discussion forum. This forum can continue for many years, depending on the needs of the group.

Supervision

For both staff and interns, in the first one to three years, consultants meet with two supervisors for one hour per week (at a minimum) for reflective/clinical supervision. Often, one of the two supervisors is also the consultant's administrative supervisor, and items related to administration are held within the context of the clinical/reflective supervisory relationship. If neither clinical supervisor is the administrative supervisor, the consultant will meet for an additional hour per month with that supervisor.

After a few years, depending on the individual needs of the consultant, supervision may shift to being held by just one person, who continues to meet weekly for one hour with the consultant.

Additionally, staff consultants meet twice per month as a group. In this forum, case materials and topics related to IECMHC are discussed and shared.

Twice per month, the supervisors meet to discuss topics and issues related to the practice of clinical/reflective supervision in IECMHC. This group also allows supervisors who "share" a consultant to confer and collaborate, ensuring that the needs of the consultants are addressed and supported in the most optimal ways.

Supervisors have the following training and support:

- ◆ Supervisors are senior consultants who have had at least three (and ideally five) years of experience providing IECMHC services and have received training in the topic areas described above.
- ◆ New supervisors are provided with training and supervision that focuses on supervision of IECMHC. Training takes place in a bi-weekly reflective forum that promotes discussion and exploration of the supervisory stance, tasks, responsibilities, and challenges. Participation in this forum is ongoing.
- ◆ Our program seeks to support a supervisory staff that is representative of the communities we serve and to promote equity and diversity in these leadership positions.

Contact:

Kadija Johnston, L.C.S.W.

Director

U.C.S.F. Infant-Parent Program/Daycare Consultants

S.F.G.H./Department of Psychiatry

1001 Potrero Ave., Building 5, Suite 7E

San Francisco, CA 94110

Phone: 415-206-5082

Email: Kadija.Johnston@ucsf.edu

<http://psych.ucsf.edu/zsfg/ipp>

