This tip sheet outlines four common models of relationship-based professional development. We'll look at each model's core activities, goals, and outcomes. We'll also identify what the four models have in common, and how those traits are key to their effectiveness.

Professional development means continued education and training after one has entered the workforce. It is an important part of career development. For professionals who work with children and families, a number of professional development models can help them do their work effectively. These approaches go beyond one-time workshops or training events. Instead, they involve multiple meetings with a facilitator— typically a coach, a trainer, a consultant, or another expert. The goal of professional development can be to build skills, increase job effectiveness, or cope with job stress. Or the goal can be to improve a practice or a program.

DIFFERENT MODELS OF PROFESSIONAL DEVELOPMENT

Reflective supervision/consultation (RSC) in early childhood settings and **infant and early childhood mental health consultation (IECMHC)** are based on infant mental health theory, which arose in clinical psychology. Both models are highly relationship-based. In RSC and IECMHC, positive relationships are both the main driver of change and the main outcome.[1]

Technical assistance (TA) and **coaching** are strongly tied to adult learning theory, which comes from the education field. These models view information and feedback as the main drivers of change. They focus on achieving specific goals or meeting best practices set by a larger system.[2,3] RSC and coaching focus mainly on individual professionals. IECMHC and TA are about changing larger systems.

Infant mental health approaches		Adult learning approaches	
Based in: clinical psychology **Driver of change:** positive, supportive relationships **Focus:** increased self-awareness and perspective-taking, non-judgmental stance		**Based in:** education **Driver of change:** information and feedback, internal drive **Focus:** achieving set goals or fidelity to best practices	
RSC	**IECMHC**	**Coaching**	**TA**
Regular, ongoing meetings with trained consultant to discuss reactions to the work	Use of mental health professionals to support early care and education classrooms and teachers via consultation and other tools	Professional works with an expert to assess, reflect, and improve their practice	Coordinated support to help a system build capacity or improve processes
Individual level	**Systems level**	**Individual level**	**Systems level**

Common principles
Reflection, relationship-based, consistency over time

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Relationship-Based Professional Development Models

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MODEL ACTIVITIES, GOALS, AND OUTCOMES

Reflective Supervision/Consultation

Reflective supervision and consultation (RSC) focuses on the frontline professional: their role, their relationships, and their well-being. There is one main activity: conversation between a supervisor or consultant and a frontline worker (or workers). A supervisor can be trained to provide RSC to their direct reports. An external consultant can also be brought in to provide RSC. Conversations can happen one-on-one or in a group. There is no particular end goal. RSC is seen as constant, ongoing support.

RSC is well-established in clinical psychology and home visiting. Sometimes it's used in other disciplines, like early care and education, early intervention, and child welfare. Evidence suggests that professionals highly value RSC and that it can play a role in reducing work stress and burnout. Theoretically, it can also support effective interventions for clients. However, that research is currently limited.[4,5]

Infant and Early Childhood Mental Health Consultation

Infant and early childhood mental health consultation (IECMHC) was created to meet the needs of early care and education systems. It can focus on a particular child with emotional or behavioral challenges. Or it can focus on a classroom and how it functions and impacts students. It can look at a whole program, too. For example, IECMHC could help program leadership improve an early care and education program's overall quality. Activities can include reflective conversations, child observations, meetings with families, consulting with directors, and participating in staff meetings. IECMHC is often time-limited in response to a specific issue.

Studies show that IECMHC improves teacher-child relationships. It improves teachers' sensitivity and effectiveness at addressing social and emotional needs. It also promotes child care quality and decreases expulsion rates. Furthermore, it reduces teacher stress and turnover.[6] It often includes RSC for the consultants who provide IECMHC.[7]

Coaching

Coaching is often part of Technical Assistance, but it can stand alone. It typically focuses on helping a professional develop a specific skill or practice. Activities may include reflective conversations, observation, modeling or role playing, and sharing information. A professional might undergo training around a specific topic or skill at the same time. Coaching typically lasts several months and concludes when the goal is achieved. Studies show coaching is effective in the education field. For example, it can lead to improvements in reading or math instruction. It can also lead to improvements in the quality of the educational environment. Coaching is widely used in education, home visiting, child care, business, and many other professional environments.[8]

Technical Assistance

Technical Assistance (TA) is an umbrella term for a system of supports intended to improve outcomes. It aims to impact large systems, typically with a specific goal. It includes a wide menu of activities, including training, coaching, self-assessment, evaluation, and feedback. TA is often used to help an organization adopt and integrate a process or best practice. How much assistance an organization gets and for how long depend on their needs and resources. Often, though, TA is a longer-term process. In comparison with other professional development models, there has been less formal research done on the effectiveness of TA. A recent review of the evidence for training and technical assistance centers found that the purpose of TA is well-intentioned. However, little conclusive evidence that TA results in better practices was found.[9]

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COMMON PRINCIPLES ACROSS MODELS OF PROFFESIONAL DEVELOPMENT

These four professional development models were built on different theories. They involve different activities, and they require different things from the facilitator and the participant. However, they have a few core features in common. These foundational features are emerging as recommended practices.

1. Reflection
2. Relationship-based
3. Consistency over time

Reflection

For professional development to impact our work, we need dedicated time and space for reflection. Reflection means looking back on our interactions with other people, considering other perspectives, and investigating our own assumptions and biases. While learning new information is important, that alone usually won't make us do things differently. *Reflection is the key ingredient that can link new information to actual change in behavior.*

"So you can probably guess that in terms of professional development, a lot of how we prefer to work is in reflective spaces, where we can talk, where we are seeing each other over and over and over again, where we can cry together, where we can build trust, where we can share resources."

—Dr. Eva Marie Shivers, Indigo Cultural Center

Relationship-based

The relationship between the facilitator and the participant(s) is key. There must be trust and mutual respect in the relationship. When discussing sensitive emotional topics, we need a certain level of safety to allow ourselves to be vulnerable. When the person providing your professional development can relate to your experience in some way, that can also be very beneficial. That's true whether what you have in common is part of your work experience, personal background, or another aspect of your life.

"I always think that the relationship that I build, the partnership that I build with the persons that I'm either training or coaching, is really critical to the durability of the change that I want them to apply to their program. If they don't trust me, or respect me, or know that I am simply there to support their growth, to make their jobs easier, to support the growth of the children and their families, then it's just another one of those things that they have to go through to check off a box."

—Denise Perez Binder,
National Center for Pyramid Model Innovations

Consistency over time

One-time encounters don't usually produce sustained change. Meeting regularly over time is necessary for both deep reflection and the development of meaningful relationships. The duration of the support varies. It depends on the model and the identified needs. The greatest impact happens after repeated meetings.

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DEFINING IT

Reflective supervision or consultation (RSC)

A form of relationship-based professional development consisting of regular meetings between a trained reflective supervisor or consultant and a frontline worker or group of workers. Conversations reflect on what has happened during work interactions. This includes discussing important relationships and participants' emotional response to their work.[10]

Infant and early childhood mental health consultation (IECMHC)

An relationship-based intervention that teams mental health professionals with early childhood education professionals. Its goal is to improve the social, emotional, and behavioral health of children in early education programs. This approach uses tools such as child observations and consulting with directors, teachers, and families.[11]

Coaching

In this form of relationship-based professional development a coach with specialized knowledge engages with a professional to promote reflection. Together, they assess the professional's effectiveness, identify areas for improvement, and develop a plan for action in future situations.[12]

Technical assistance (TA)

A system of coordinated supports, such as training, coaching, consulting, assessment, and evaluation. The goal of TA is to build an organization's capacity or improve their processes. This work is done by a professional with specific subject matter expertise. TA aims to make systemic change using evidence-based practices, often at the state or district level.[13,14]

DIVING INTO IT

For additional information on this topic:

Please visit our website: **ceed.umn.edu**

Check out the Relationship-Based Professional Development Credential. The TARSS program at CEED offers this credential for early childhood coaches, mentors and consultants: **z.umn.edu/rbpd_credential**

For more on RSC, see the *Best Practice Guidelines for Reflective Supervision/Consultation* from the Alliance for the Advancement of Infant Mental Health: **allianceaimh.org/reflective-supervisionconsultation**

For more on IECMHC, the Georgetown Center for Early Childhood Mental Health Consultation offers information on IECMHC competencies: **z.umn.edu/ecmhc_competencies**

REFERENCES

The sources referenced in this tip sheet can be found at: z.umn.edu/introducing_pd_refs