

## Content area 1: Child development

### Physical Development

*Movements, balance and co-ordination*  
**Fine motor** – small movements often made using hands, such as picking up a spoon or using a pencil  
**Gross motor** – large movements such as running balancing & throwing.

### Communication and Language development

*Talking, listening & understanding. Reading & writing for older children.*  
**Receptive language** – what children can understand  
**Expressive language** – what children can say

### Social & emotional development

*Relationships with others, managing feelings, confidence & self-control*  
**Attachment** – a close bond between the child & their parents  
**Bonding** – the process by which children & parents develop a strong loving relationship

### Cognitive development

*Thinking, memory & understanding concepts such as time, colour & number*  
**Object permanence** – the ability to understand that objects when placed out of sight are still in existence  
**Trial by error** – seeing what happens after an action has been made & learning from it.

### Expected pattern of Physical development.

#### Fine motor

At birth:

- hands are firmly closed
- Often fold their thumb under fingers
- 1 years:
- Clasps hands together
- Points using index finger
- 2 years:
- Draws lines, dots and circles
- Separates interlocking toys
- 3 years:
- Fastens large zip
- Begins to show preference for dominant hand
- 4 years:
- Begins to fasten buttons
- Uses spoon and fork well to eat
- 5 years:
- Can use a knife and fork
- Can thread small beads

#### Gross Motor

At birth:

- Lies with head to one side
- Head lags when pulled to sitting position
- 1 year
- Sits down from standing
- Is more mobile
- 2 years
- Runs with control
- Throws and kicks a ball
- 3 years
- Can walk backwards and sideways
- Jumps with both feet

### Expected pattern of communication and language development

At birth:

- Cries to indicate needs
- Recognises main caregiver's voice
- 1 years:
- Understands simple frequent words
- Babbles leading to spoken words
- 2 years:
- Uses 50 words or more
- Refers to self by name
- 3 years:
- Uses 200 words or more
- Joins in simple rhymes
- 4 years:
- Enjoys telling and sharing stories
- Can be understood easily by others
- 5 years:
- Shows signs of reading
- Concentrates and maintains attention

### Holistic Development – Overall development of a child

### Expected pattern of social and emotional development.

At birth:

- Expresses pleasure when being fed
- Often imitates facial expressions
- 1 years:
- Enjoys simple games
- Dependant on others
- 2 years:
- Frustrated when unable to express feelings
- May be clingy
- 3 years:
- Expresses emotions
- Enjoys playing with others
- 4 years:
- More confident in new situations
- Can be sensitive to others
- 5 years:
- Enjoys group play
- Has likes and dislikes



### Expected pattern of Cognitive development.

At birth:

- Turns head towards bright light
- Startled by sudden noises
- One year
- Understand simple instructions
- Responds to gestures
- 2 year
- Understands consequences for actions
- Names pictures and objects in book
- 3 years
- Recognises objects that are heavy and light
- Sorts objects by shape and size
- 4 years
- Counts to 10
- Names some colours
- 5 years
- Can count to 20
- Understand basic rules

**Transition** – a change of place, family circumstance and/or carer.

## Content area 2: Factors that influence the child's development

### Nature: Biological.

### Nurture: Environmental

Biological Factors	Example	Environmental factor	Example
<b>Physical traits</b> – some are linked to genetic inheritance.	Height, physical strength, face shape, eye colour.	<b>Love &amp; interaction</b> – children thrive if they feel loved & have plenty of positive attention from the adults who care for them.	Cuddles, time to talk, being spoken to positively, being listened to.
<b>Medical conditions</b> - most are linked to genetic inheritance.	Diabetes, asthma, sickle cell anaemia.	<b>Stimulation &amp; play</b> – children benefit if there are opportunities to play, talk and do different things.	Going to different places, doing different things, playing with adults and other children, sharing books.
<b>Learning difficulties</b> – are most likely as a result of genetic inheritance.	Autistic spectrum conditions, dyslexia.	<b>Physical conditions/ socio-economic</b> – Children need shelter, warmth and to be physically safe. They also need room to move and explore.	Warm home, opportunities to go outdoors, space to play indoors.
<b>Disabilities</b> – some are linked to genetic inheritance, whilst others may occur during pregnancy and birth	Deafness, sight problems, cerebral palsy, spina bifida.	<b>Food &amp; drink</b> – children need food & drink that is nutritious and healthy. This helps them to grow and have the energy to explore, move and learn.	Developing good food habits including enjoying vegetables and foods high in nutrients.
<b>Personality &amp; temperament</b>	Shyness, curiosity, outgoing	<b>Family Lifestyle:</b>	Abuse, neglect, drug/alcohol abuse, healthy diet, poor diet.
<b>Pregnancy &amp; birth</b> – how healthy a mother is during pregnancy can affect a child's development	German measles, fetal alcohol syndrome, spina bifida, developmental difficulties.	<b>Personal factors</b> are about inherited traits and also what happened before and immediately after you were born. <b>External factors</b> are about where and how you grew up. They also include the events and experiences that you have had.	

### Common Transitions

- Going to a pre-school, nursery or childminder
- Starting school
- Being cared for by a family member
- Going to a club or class
- Changing group or class within a nursery, pre-school or school.
- Arrival of a new baby
- Moving home
- Death or illness of a family member
- Family breakdown e.g. divorce

### Impacts of transitions on a child's development

- Language development** child not wanting to talk, finding it hard to listen and withdrawing.
- Intellectual development** concentration, memory may be limited, children need to be interested in what they are learning.
- Social & emotional** can cause anxiety, behavioural changes, **Physical** can be loss of appetite. Sleep patterns, regression

**Illness** – Stress affects how well children can fight illness. They may get more coughs and colds than usual.



**Sleep** – When children are stressed, they find it hard to get to sleep or may wake up a lot.

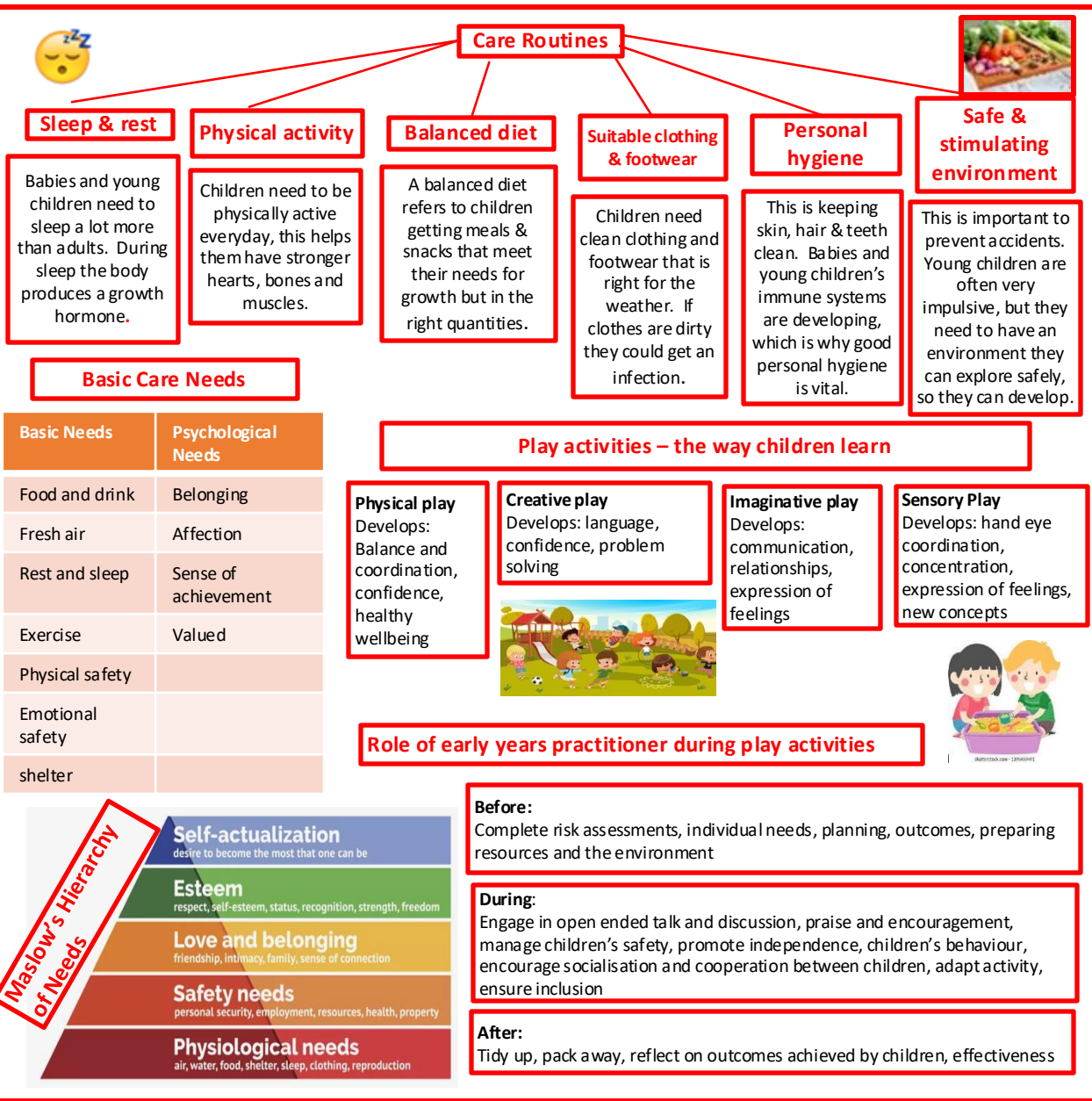


**Lack of energy/ interest** – Children many not be interested or have the energy to run or explore, this can mean that physical skills are not being practised.

**Feeding** – When children are unsure or stressed. They may find it hard to eat or lose their appetite.

Possible effects of transitions

## Content Area 3: Care routines, play and activities to support the child



## Content Area 4: Early Years Provisions

<b>Statutory</b> - These are services that have to be available by law, i.e. through legislation which requires either the government or local authorities to provide them.	<b>Private</b> - These are profit-making services. They will be run by a owner or company.	<b>Independent</b> - These are services that are provided independently of the state and do not rely on government funding	<b>Voluntary</b> - These are services that are usually run by a charity, where some or all of their funding comes from donations.
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Setting	Description	Age
Registered childminder	A registered childminder looks after the children in their own home and is self-employed. They need to be registered and inspected by Ofsted, and offer flexible and individualised care for children. They can look after up to six children between the ages of birth to eight years, including their own.	0-8yrs+
School-based nursery	A school-based nursery will be attached to an infant or primary school They only run during term time. A child may start from two years in an independent school. However, a school-based nursery usually starts the year before the child begins full time education in Reception, so around four years.	Varies
Reception class	A school reception class will start during the years of the child's 5th birthday. Children may start by attending on a half-day basis but will quickly build up to a full day. School-based settings are registered and inspected by Ofsted.	4-5yrs
Children's centres	They offer a range of different services for children under five and their families. They may be located on school sites or local authority sites. These services also may differ within different areas, but may include health & support for families with young children. They also usually include play centres where parents can attend with their children.	0-5yrs
Day nursery	They must be registered and inspected by Ofsted and are usually open all day. They can be private, voluntary or workplace based. Some will have longer hours and will be open during weekends and evenings.	0-5yrs
Out of school clubs/ play centres	These are clubs which are run for school-age children before and after school, and may run during school holidays.	4+
Parent & toddler group	These are drop-in sessions for parents of young children and are usually run by volunteers and other parents. Parents will have responsibility for their children.	0-3yrs
Playgroup/ pre-school	They may be run by parents or children may be left in the care of staff. If children are left in the care of staff, they must be registered with Ofsted. They are usually run on a voluntary basis during term time and have sessions of around 3 hours.	2-5yrs
Workplace nursery	This provides care and education for children at the place where their parents work.	3 mths+
Nanny	A nanny is a carer who is employed by a child's parents to look after the child in their own home. Nannies will often look after more than one child if needed and are usually very flexible. However, although many do have training, they are not required to have qualifications.	0-5yrs+
Crèche	A crèche will provide interim care for children from time to time while their parents are engaged in a one-off activity such as shopping, sport, or other activity, usually on the same premises. They are not required to register with Ofsted but can choose to do so.	Varies
Variation in Early Years Provision:	Accessibility: Cost, eligibility, location, opening times	Capacity: Number of children Ratio of staff to children
	Facilities: Indoor & Outdoor environment, Resources	Approach: To learning, Policies, Procedures

## Content Area 5: Legislation, policies and procedures in the early years

**Regulatory authority – OFSTED – Part of the government, inspects settings to ensure suitability.**

**Legislation:** A law, or set of laws that have been passed by parliament.

**Framework:** A set of standards that must be met.

**Policy:** An action adopted by an organisation.

**Procedure:** An established way of carrying out a policy.

Act	Policy	Procedure
The Health and Safety at Work Act 1974 – health, safety and welfare of children, staff and visitors within the workplace	<ul style="list-style-type: none"> <li>Health and safety policy</li> <li>Food and drink policy</li> <li>Visitors to the setting policy</li> </ul>	<ul style="list-style-type: none"> <li>Risk assessments</li> <li>Safe working practices during food prep</li> <li>Reporting accidents</li> <li>Signing visitors in and out</li> </ul>
United Nations Convention on Rights of the Child – 1989 – grants all children under 18 the rights	<ul style="list-style-type: none"> <li>Safeguarding</li> <li>Play policy</li> <li>Equality and diversity</li> </ul>	<ul style="list-style-type: none"> <li>Report abuse (record keeping/reporting)</li> <li>Provide play</li> <li>Adapt activities</li> </ul>
Equality Act 2010 – ensures an individual's characteristics are protected	<ul style="list-style-type: none"> <li>Equality and diversity</li> </ul>	<ul style="list-style-type: none"> <li>Provide resources that reflect society</li> <li>Good role model</li> <li>Adjust activities</li> </ul>
General Data Protection Regulation 2018 (GDPR) – data protection and privacy on how personal data is used and stored	<ul style="list-style-type: none"> <li>Confidentiality</li> </ul>	<ul style="list-style-type: none"> <li>Share information with consent</li> <li>Store information safely</li> <li>Share information on a 'need to know' basis</li> </ul>
The Early Years Foundation Stage Statutory Framework (EYFS)	<ul style="list-style-type: none"> <li>Keyworker</li> <li>Safeguarding</li> <li>Health and safety</li> </ul>	<ul style="list-style-type: none"> <li>Ensure staff/child ratio</li> <li>Respond to disclosure</li> <li>No personal use of mobiles</li> </ul>

**The role of the practitioner in supporting and maintaining these procedures.**

### Health and safety procedure

- risk assessments
- Security checks
- Safety of equipment
- First aid procedures
- Report incidents/accidents
- Hygiene routines
- Follow emergency and fire evacuation procedures
- Safe disposal of bodily fluids and waste
- Manual handling safety

### Equality and Inclusion Procedure

- recognise and celebrate individuals
- Ensure dignity and respect
- Reasonable adjustments
- Appropriate resources
- Adapt materials
- Positive images
- Treating every equally
- Meeting individual needs
- Ensure anti-discriminatory practice

### Safeguarding Procedure

- Protecting children
- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect
- How to respond and report

### Confidentiality Procedures

- Build trust between all those involved
- Safeguarding
- Legal requirement
- Privacy
- Obtain consent/permission
- 'Need to know; principle

## Content Area 6: Expectations of the early years practitioner

**Behaviour** – how you will behave as an early years worker

- Role model – Children will copy what you do, so always try to act as you want them to. E.g. when having lunch with a child, ensure you have good table manners.
- Positive attitude – smiling, offering to help, going the extra mile
- Professional boundaries,
- Working within the policies and procedures
- Effective communication

**Appearance** - What you wear and general appearance

- Personal hygiene
- Body art, piercings, tattoos
- Clothing and accessories

**Timekeeping and attendance**

- Punctuality
- Attendance
- Dealing with absence



## Content Area 7: Roles and responsibilities within early years settings

### Roles

- Manager
- Early years practitioner
- Room leader
- Key person
- Childminder
- Teaching assistant
- nanny

### Responsibilities

- Keeping children safe
- Support healthy development
- Promote development
- Work in partnership

**Partnership working:** different services and professionals working together with other teams or people to meet the child's and/or families needs.

**How partnership working benefits the child, family and the early years practitioner.**

Child: promotes safeguarding, consistent care, interventions, holistic needs  
Family: support, shared goals, builds trust  
Early Years Practitioner: advice and information, planning activities, trust, shared goals, work together.

### Specialist roles inside the setting

SENCO – Special educational needs and disabilities co-Ordinator

- Co-ordinates provision for children with SEN
- Responsible for overseeing, assessing, planning, and monitoring progress
- DSL – Designated safeguarding lead
- Responsible for child protection
- Ensures policies and procedures are in place
- Makes referrals
- Monitors needs of children and families
- PANCO – Physical activity and nutrition coordinator
- Acts as a champion for best practice
- Promotes health and wellbeing

Key person – A requirement of the early years foundation stage (EYFS)#

- Works with small groups of children
- Offers care to promote children's growth and development



### Specialist roles outside the setting

SEND teams:

- physiotherapist – helps and individual affected by injury, disability, illness with movement and exercise, manual therapy, education and advice
- Educational psychologist – assesses an individual with special needs, emotional or behavioural difficulties

Health professionals:

- General practitioner (GP) – diagnoses and treats medical conditions
- Paediatrician – doctor who specialises in the treatment and care of children and young people
- Health visitor – works with children and families to support and promote health and development

Children's social care

- Social care – provides assessment of a child and their family needs and offers a range of support to ensure a child is protected and well cared for
- Family support worker – provides practical advice and support to the individuals and families in need on a range of issues.



## Content Area 8: The importance of observations in early years childcare

### How observations support child developments

#### Formative assessment:

- Assessments that inform planning and immediate responses to children
- Find out the child's interests
- Helps identifies stages of development
- Understand triggers in behaviour
- Gain insight to share with parents/carers/professionals
- Supports provision for the characteristics of effective learning
- Plan development activities

#### Summative assessment:

- Assessments that provide a summary of the child's learning and development at a point in time
- Evaluates effectiveness of interventions
- Supports assessment of the child's development
- Supports other professionals
- Plan learning and development activities
- Track progress against current frameworks

Observation: the action or process of closely observing or monitoring something or someone.

#### Objective and subjective observations

##### Objective:

- A record of what is seen and heard
- It does not include an opinion
- It states the facts and details only
- It avoids interpretation

##### Subjective:

- Is influenced by past events
- Is based on personal experiences
- Is based on opinion, feelings and assumptions
- Is subject to interpretation

#### Components of recording observations

**Aim:** what the observer wants to find out

**Recording:** the method used, and information gained

**Evaluation:** an assessment of what has been observed and recorded

**Planning:** consider what should happen next to support the child and the activities that could support the holistic development



Holistic development: the overall development of a child.

### Different methods of observation

**Media methods:** Make a video recording, take a photograph, record observations in a digital format

**Learning journal:** Collection of notes, observations and thoughts built up over a period of time

**Post-it notes:** make a note of a child's behaviour or skill, temporarily attach a note to a document or surface

**Narrative/free description/written account:** a short observation focused on the child, write everything down during the period of observation of the child

**Checklist:** check whether the child can achieve a specialised skills, record findings.

## Content Area 9: Planning in early years childcare

Child-centred approach – the approach enables children to initiate and direct their own play with the support of interested and responsive adults.

### Purpose of the planning cycle

- ❖ **To identify the individual needs of the child**
- Physical
- Cognitive
- Communication and language
- Social and emotional
- ❖ **Identify support needs**
- ❖ **Establish action planning**
- ❖ **Develop partnership working**
- ❖ **Refer to other**

### Planning Cycle

- ❖ **Observe** – the child's holistic growth and development
- ❖ **Assess** – compare with expected milestones of development, against current framework expectations, where a child may need support or early intervention
- ❖ **Plan** – agree and record what the child needs: additional resources, specific activities, change in routine, referral to other professionals, how practitioners will provide support or early intervention
- ❖ **Implement** – put agreed plan into practice, share with other professional and parent/carers, record actions taken
- ❖ **Review** – observe the extent to which the needs have been met, make any adjustments to the plan, engage in partnership working, opportunity for practitioner reflection.

## Exam breakdown – How am I being assessed?

### Assessment breakdown

Non-exam assessment (NEA)

50%

Examined assessment (EA)

50%

Total

100%

- 1 hour 30 minutes examined assessment
- 14 hours non-exam assessment

Externally-set, internally marked and externally moderated:

- **Synoptic project**

Externally set and externally marked:

- **Written exam**

Overall grades:

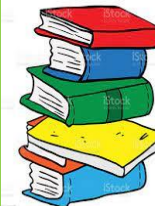
**Level 1: pass, merit and distinction**

**Level 2: pass, merit and distinction**

## Top Exam Tips

### Before the exam

- Revision
- Plenty of rest/sleep
- Manage your time
  - Exercise
  - Ask for help
- Make a revision timetable
- Have enough food and drink
  - Get organised
- Arrive early for exam



### During the exam

- Read questions carefully
- Answer every question
- Use all the time you have been provided
- Re-check your answers if you have spare time
- Highlight keywords if you find it helpful
  - Be positive
  - Stay calm



# Glossary

- Accident:** an unintended incident which might cause physical injury to a child, visitor or member of staff.
- ADHD:** attention deficit hyperactivity disorder, a condition which affects behaviour and makes it difficult to concentrate.
- Adult-led:** activities or play that is organised and led by adults.
- Asymmetric tonic neck:** a reflex where if the baby's head is turned to one side, the knee and arm on the other side bend.
- Bereavement:** when a close family member or friend dies.
- Bilingual:** speaking two languages.
- Breach:** failing to keep to an agreement.
- Child-centred:** putting the needs of the child first and encouraging them to be independent.
- Child-centred approach:** when adults focus on what children need and want.
- Chronic illness:** a long-term health problem.
- Cognitive skills:** relating to the development of thinking and remembering.
- Commentary:** talking about what is happening as it takes place.
- Confidentiality:** making sure that private information about children and their families is kept private.
- Consent:** permission to do something.
- Consistently:** for settings, this means everyone working to an agreed set of ideas.
- Cruising:** how babies move, walking by holding onto furniture.
- Cultural identity:** shared cultural characteristics, such as language, religion, festivals, music and food.
- Deficiency:** a lack of one or more nutrients which may cause problems with growth and development.
- Degenerative:** health conditions that reduce how much a child can do or learn over time.
- Disclosure:** making information known to others.
- Diversity:** the range of values, attitudes, cultures and beliefs held by different people.
- DSL:** designated safeguarding lead – the person in the setting who is responsible for monitoring and acting on safeguarding concerns.
- Early Learning Goals:** targets for the skills and knowledge that children should have developed by the end of the reception year (Early Years Foundation Stage profile).
- Early Years Foundation Stage (EYFS):** this sets out the requirements for children's learning and development from birth to five years.
- Eczema:** a skin condition causing the skin to be dry and itchy.

# Glossary

**Education, Health and Care Plan (EHCP):** a document which outlines the support a child or young person needs to meet their potential while they are in the education system and up to the age of 25.

**Eligibility and admissions criteria:** the rules set down by an organisation about which children or families can attend the setting

**Emergency:** a life-threatening situation or one which may pose immediate risk.

**Emotional needs:** conditions which need to be met to feel happy and fulfilled.

**Emotional wellbeing:** positive emotional state.

**Empathise:** to see a situation from someone else's point of view.

**Empathy:** being able to understand another person's feelings.

**English as an additional language (EAL):** when someone speaks English but it is not their first language.

**Environmental influences:** aspects of a child's life that will affect their development.

**Equality:** individuals are treated in the same way.

**Equity:** ensuring that each child has the resources they need to succeed.

**Facilitate:** organising the play environment to encourage learning.

**Facilities:** places or equipment that an early years setting can offer.

**Fine motor skills:** co-ordination of small muscles, precise movements and hand-eye co-ordination.

**Genetic make-up:** chromosomes and genes that contain information to make cells.

**Gross motor skills:** skills that involve the large muscles of the arms, legs and torso.

**Hazard:** something in the setting that could cause harm.

**Hierarchy:** placing items of a list in the order of importance.

**Holistic care:** overall care of the child, valuing each area as important and interconnected. In this context, viewing the child as a whole person.

**Holistic development:** children's overall development.

**Incident:** an event which might cause an injury or develop into an emergency.

**Inclusion:** every child is given equal access to education and care.

**Inclusive:** something which is open to and includes everyone.

**Induction:** the process of introducing new staff to the setting.

**Inherited characteristics:** features that can be traced back to a child's biological family.

**Intervention:** resources or support to help a child with their learning or development.

**Intimate care:** when taking care of another person's personal care needs, for example when helping them to go to the toilet.

**Key person:** a named member of early years staff who works with a specific group of children and their families.

**Long-term plans:** topic plans which are set out over a year.

# Glossary

**Malpractice:** failing to carry out professional duties.

**Media:** the way in which types of art are expressed, for example through paint, drawing or music.

**Medium-term plans:** termly or half-termly plans.

**Milestones:** skills that are expected at different ages.

**Notifiable disease:** a disease which needs to be reported by law to the authorities.

**Objective observation:** the observation is based on facts.

**Open-ended talk:** questions and conversations which encourage the other person to answer fully, rather than just replying 'ye 'no'.

**Open question:** a question that does not have a 'Yes' or 'No' answer and which encourages children to explain their understanding.

**Partnership working:** different services and professionals working together with other teams or people to meet the child's and family's needs.

**Personal protective equipment (PPE):** protective equipment that is worn to stop contamination, for protection when dealing with personal care, such as nappy changing and when cleaning up bodily fluids.

**Physiological:** the way in which living things work or function.

**Policies:** statements about how an early years setting will prevent or deal with different circumstances.

**Potential:** what you are capable of.

**Primitive reflexes:** movements that newborns automatically make.

**Privileged information:** information which should only be given to authorised people.

**Procedures:** detailed information about how a policy will be put into action.

**Professional boundaries:** the limit of a relationship in a professional situation.

**Psychological:** a condition that relates to the mind.

**Ratified:** to be formally agreed by government.

**Ratio of staff to children:** the proportion of staff to the number of children.

**Reasonable adjustment:** removing barriers and putting measures in place so that an individual can take part in an activity.

**Regression:** when a child's development goes back to an earlier stage.

**Regulation:** rules made by an authority to control the way something is done.

**Resilience:** the ability to cope with setbacks and problems.

**Respite:** having a break from caring.

**Risk:** the chance, whether high or low, that someone could be harmed by a hazard.

**Risk assessment:** a check for potential risks so that steps may be put in place to control them.

**Safeguarding:** the way in which we protect children and keep them from harm.

**Scaffold learning:** providing support for learning through breaking it into small steps.

**Scented dough:** a type of playdough with an added smell or scent, such as lavender.

**Self-care skills:** skills that make children independent, such as dressing, feeding and toileting.

**Self-regulate:** to be able to manage your own emotions.

**Short-term plans:** plans for a week or a day.

**Spatial awareness:** knowing where your body is in relation to things around you.

**Special educational needs and disabilities (SEND):** a learning need or disability which means that special support is needed to help a child or young person as part of inclusion.

**Standardisation:** creating standards for all settings.

**Statutory:** something that is required by law.

**Subjective observation:** the observation is based on opinions and personal views.

**Sustained shared thinking:** an activity in which two people, usually an adult and child, work together to solve a problem.

**Transition:** the change from one stage, place or person to another.

**Visual cues:** clues to help pass on messages or information, such as pointing to something as you are talking about it.

**Voluntary provision:** not profit-making as the aim of the organisation is to support families.

**Wellbeing:** how healthy and happy a person feels.

**Whistleblowing:** when someone in an organisation reports malpractice or wrongdoing, sometimes to authorities outside of the setting.

# Glossary