# NCFE CACHE: Level 1-2 Technical Award Child Development & Care in the Early Years

Nature: Biological.

# **Content area 1: Child development**

#### Physical Development

Movements, balance and coordination

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.

# Expected pattern of Physical development.

#### Fine motor At birth:

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 circlesSeparates 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 yearSits down from standing
- Is more mobile
- 2 years
- Runs with control
- Throws and kicks a ball 3 years
- Can walk backwards and side ways
- Jumps with both feet

#### Communication and Language development

Talking, listening & understanding. Reading & writing for older children.

Receptive language – what

children can understand

Expressive language – what
children can say

#### 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

# 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

# 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

# 1

#### 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 Cognitive development.

At birth:

- Turns head towards bright light
- Startled by sudden noises
   One year
  - 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

_			
Biological Factors	Example	Environmental factor	Example
<b>Physical traits</b> – some are linked to genetic inheritance.	Height, physical strength, face shape, eye colour.	Love & interaction – 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.	Stimulation & play – 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.	Physical conditions/ socio-economic – 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.	Food & drink – 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.
Personality & temperament	Shyness, curiosity, outgoing	Family Lifestyle:	Abuse, neglect, drug/alcohol abuse, healthy diet, poor diet.
Pregnancy & birth – how healthy a mother is during pregnancy can affect a child's development	German measles, fetal alcohol syndrome, spina bifida, developmental difficulties.	Personal factors are about inherited traits and also what happened before and immediately after you were born.  External factors 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
- · Moving nome · 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.

Fe ur ha

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

Possible

effects of

transitions

**Nurture: Environmental** 



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



energy to run or explore, this can mean that physical skills are not being practised.

# NCFE CACHE: Level 1-2 Technical Award Child Development & Care in the Early Years

Nature: Biological.

# **Content area 1: Child development**

#### Physical Development

Movements, balance and coordination

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.

# Expected pattern of Physical development.

#### Fine motor At birth:

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 circlesSeparates 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 yearSits down from standing
- Is more mobile
- 2 years
- Runs with control
- Throws and kicks a ball 3 years
- Can walk backwards and side ways
- Jumps with both feet

#### Communication and Language development

Talking, listening & understanding. Reading & writing for older children.

Receptive language – what

children can understand

Expressive language – what
children can say

#### 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

# 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

# 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

# 1

#### 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 Cognitive development.

At birth:

- Turns head towards bright light
- Startled by sudden noises
   One year
  - 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

_			
Biological Factors	Example	Environmental factor	Example
<b>Physical traits</b> – some are linked to genetic inheritance.	Height, physical strength, face shape, eye colour.	Love & interaction – 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.	Stimulation & play – 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.	Physical conditions/ socio-economic – 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.	Food & drink – 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.
Personality & temperament	Shyness, curiosity, outgoing	Family Lifestyle:	Abuse, neglect, drug/alcohol abuse, healthy diet, poor diet.
Pregnancy & birth – how healthy a mother is during pregnancy can affect a child's development	German measles, fetal alcohol syndrome, spina bifida, developmental difficulties.	Personal factors are about inherited traits and also what happened before and immediately after you were born.  External factors 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
- · Moving nome · 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.

Fe ur ha

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

Possible

effects of

transitions

**Nurture: Environmental** 



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



energy to run or explore, this can mean that physical skills are not being practised.

# **Knowledge Organiser**

# NCFE CACHE: Level 1-2 Technical Award Child Development & Care in the Early Years

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

#### **Care Routines** Safe & Sleep & rest Physical activity **Balanced diet Personal** Suitable clothing stimulating hygiene & footwear environ ment Babies and young A balanced diet Children need to be children need to refers to children This is keeping physically active Children need This is important to sleep a lot more getting meals & skin, hair & teeth everyday, this helps clean clothing and prevent accidents. than adults. During snacks that meet clean. Babies and them have stronger footwear that is Young children are sleep the body their needs for young children's hearts, bones and right for the often very produces a growth growth but in the immune systems muscles. weather. If impulsive, but they hormone. are developing, right quantities. clothes are dirty need to have an which is why good they could get an environment they personal hygiene can explore safely, infection. **Basic Care Needs** is vital. so they can develop. **Basic Needs Psychological** Play activities – the way children learn Nee ds Food and drink Belonging Sensory Play Creative play Imaginative play Physical play Develops: language, Develops: hand eye Develops: Develops: Fresh air Affection confidence, problem coordination, Balance and communication, solving concentration, relationships, coordination, Rest and sleep Sense of expression of feelings, confidence, expression of achievement new concepts feelings healthy Exercise Valued wellbeing Physical safety Emotional safety Role of early years practitioner during play activities shelter Before: Self-actualization Complete risk assessments, individual needs, planning, outcomes, preparing resources and the environment Esteem During: Engage in open ended talk and discussion, praise and encouragement, Love and belonging manage children's safety, promote independence, children's behaviour, encourage socialisation and cooperation between children, adapt activity, ensure inclusion Safety needs After: Physiological needs air, water, food, shelter, sleep, clothing, reproduction

Tidy up, pack away, reflect on outcomes achieved by children, effectiveness

# **Content Area 4: Early Years Provisions**

Statutory - 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.

Private - These are profitmaking services. They will be run by a owner or company.

**Independent** - These are services that are provided independently of the state and do not rely on government funding

**Voluntary** - These are services that are usually run by a charity, where some or all of their funding comes from donations.

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 a round 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

# NCFE CACHE: Level 1-2 Technical Award Child Development & Care in the Early Years

# 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> <li>Health and safety policy</li> <li>Food and drink policy</li> <li>Visitors to the setting policy</li> </ul>	<ul> <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><li>Safeguarding</li><li>Play policy</li><li>Equality and diversity</li></ul>	<ul><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	Equality and diversity	<ul><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	• Confidentiality	<ul> <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><li>Keyworker</li><li>Safeguarding</li><li>Health and safety</li></ul>	<ul><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
- Ensure anti-discriminatory practice

# Meeting individual needs

## Safeguarding Procedure

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

#### **Confidentiality Procedures**

- Build trust between all hose 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
- 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
- Workin 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

SENDCO – Special educational needs and disabilities co-Ordinator

- Co-ordinates provision for children with
- Responsible for overseeing, assessing, planning, and monitoring progress

### DSL – Designated safeguarding lead

- Responsible for child protection
- Ensures policies and procedures are in
- 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.

# **Knowledge Organiser**

# NCFE CACHE: Level 1-2 Technical Award Child Development & Care in the Early Years

# 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

#### ubjective:

- 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 needsEstablish 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/carer, 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		<ul> <li>1 hour 30 minutes examined assessment</li> <li>14 hours non-exam assessment</li> </ul>
Non-exam assessment (NEA)	50%	Externally-set, internally marked and externally moderated:  Synoptic project
Examined assessment (EA)	50%	<ul><li>Externally set and externally marked:</li><li>Written exam</li></ul>
Total	100%	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



