Highfield

Level 2 End-Point Assessment for ST0888 Early Years Practitioner

End-Point Assessment Kit

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EPA-kit

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How to use this EPA kit

Welcome to the Highfield End-point Assessment kit for the Early Years Practitioner apprenticeship standard.

Highfield is an independent end-point assessment organisation that has been approved to offer and carry out the independent end-point assessments for the Level 2 Early Years Practitioner apprenticeship standard. Highfield internally quality assures all end-point assessments in accordance with its IQA process, and additionally, all end-point assessments are externally quality assured by the relevant EQA organisation.

The EPA kit is designed to outline all you need to know about the end-point assessments for this standard and will also provide an overview of the on-programme delivery requirements. In addition**,** advice and guidance for trainers on how to prepare apprentices for the end-point assessment is included. The approaches suggested are not the only way in which an apprentice may be prepared for their assessments, but trainers may find them helpful as a starting point.

Key facts	
Apprenticeship standard:	Early Years Practitioner
Level:	2
On programme duration:	Minimum of 12 months
End-point assessment window:	Typically 3 months
Grading:	Fail/pass/distinction
End-point assessment methods:	Knowledge test
	Professional discussion underpinned by portfolio

In this kit, you will find:

- an overview of the standard and any on-programme requirements
- a section focused on delivery, where the standard and assessment criteria are presented in a suggested format that is suitable for delivery
- guidance on how to prepare the apprentice for gateway
- detailed information on which part of the standard is assessed by which assessment method
- suggestions on how to prepare the apprentice for each part of the end-point assessment
- a section focused on the end-point assessment method where the assessment criteria are presented in a format suitable for carrying out 'mock' assessments

Introduction

Standard overview

The Early Years Practitioner works and interacts directly with children on a day-to-day basis supporting the planning of and delivery of activities, purposeful play opportunities and educational programmes within the ethos of the setting. An early years practitioner works as part of a professional team ensuring the welfare and care of children under the guidance and supervision of an early years educator, teacher or other suitably qualified professional in the early years workforce.

This occupation is found in a range of private and public settings including, full day care, children's centres, pre-schools, reception classes, playgroups, nursery schools, home-based provision, hospitals, social care settings, out of school environments and local authority provision to deliver the Early Years Foundation Stage (EYFS) requirements set by the government for the learning, development and care of children from birth to 5 years in both indoor and outdoor environments.

Key responsibilities are likely to include interacting with parents, children, colleagues and wider multi agency professionals and partners such as health visitors, social workers and speech and language therapists. They will be responsible for supporting child initiated and adult led activities based around the needs and interests of each individual child, supporting children's learning through planned, purposeful play opportunities and educational programmes and working as part of a team to ensure each child feels safe and secure.

Due to the nature and level of responsibility it is not anticipated that the role would have any budgetary or leadership responsibilities.

Roles/occupations may include assistant childminder, nanny and early years worker, nursery assistant, nursery nurse and nursery practitioner.

Individuals will undergo all checks as per the EYFS requirements to ensure suitability to work with children.

On-programme requirements

While on-programme, apprentices must undertake all training to develop the occupation standard's knowledge, skills and behaviours (KSBs).

The on-programme assessment approach will be agreed between the training provider and employer. The assessment will give an ongoing indication of an apprentice's performance against the final outcomes defined in the standard. The training provider will need to prepare the apprentice for the end-point assessment, including preparation for

the discussion and collation of the portfolio of evidence (such as a provision of recordings of professional discussions or workplace evidence).

The training programme leading to end-point assessment should cover the breadth and depth of the standard using suggested on-programme assessment methods that integrate the knowledge, skills and behaviour components, and which ensure that the apprentice is sufficiently prepared to undertake the end-point assessment. Training, development and ongoing review activities should include:

- *Early Years Practitioner Qualification (level 2).
- Level 1 English and maths. If the apprentice began their apprenticeship training before their 19th birthday, they will still be subject to the mandatory requirement to study towards and achieve English and maths. The requirements for English and maths are optional for apprentices aged 19+ at the start of their apprenticeship training.
- Development of a portfolio of evidence through which the apprentice gathers evidence of their progress.

*Please refer to the DfE list of approved Early Years Practitioner qualifications.

Portfolio of evidence

The apprentice must compile a portfolio of evidence during their time on-programme that is mapped against the knowledge, skills and behaviours assessed in the professional discussion underpinned by a portfolio of evidence.

At least 1 piece of evidence relating to each knowledge, skill and behaviour. One piece of evidence can be referenced against more than one knowledge, skill or behavioural requirement. It is expected that there will typically be around **10 pieces of evidence** and a maximum of **12 pieces (1 per duty) of evidence**.

There must be **2** direct observations within the portfolio, each a minimum of **60 minutes**, which have been carried out at the apprentice's usual place of work and within the last 3 months of their learning.

Where possible the direct observations should be videoed except where there are safeguarding concerns, in which case written accounts are acceptable. Video-recorded observations must not be sent to Highfield as part of the portfolio. Video recordings **must not** leave the employer's premises and can only be viewed on site. This can be done on the day prior to the professional discussion. Written accounts, where used, should be purely factual accounts (for example, no opinion or judgements) and **must** be written by someone appropriately qualified and in a position of responsibility (such as a line manager, member of the senior management team, or the assessor for the qualification).

The portfolio should cover the KSBs for the assessment method it is underpinning and of activities that have been completed and referenced against the KSBs, supported by

appropriate evidence including photographic evidence and naturally generated work products, such as planning documents, health and safety documentation and company policies and procedures in line with the company confidentiality and safeguarding policies and procedures. Progress review documentation, witness testimonies, and feedback from colleagues and parents should also be included.

The apprentice's manager/mentor will typically support the development of the portfolio in accordance with company policy and procedures.

The portfolio **must** be accompanied by a portfolio matrix. This can be downloaded from our website. The portfolio matrix **must** be fully completed, including a declaration by the employer and the apprentice to confirm that the portfolio is valid and attributable to the apprentice.

The portfolio of evidence **must** be submitted to Highfield at gateway. It is **not** directly assessed but underpins the professional discussion.

Use of artificial intelligence (AI) in the EPA

Where AI has been used as part of the apprentice's day-to-day work and forms part of a project report, presentation, or artefact, it should be referenced as such within the work. AI must not be used to produce the report or portfolio.

Where AI has been used as part of a portfolio that underpins an interview or professional discussion or any other assessment method, it should be fully referenced within the portfolio.

Additional, relevant on-programme qualification

Learners will be required to achieve an approved Early Years Practitioner Level 2 Qualification prior to gateway.

Readiness for end-point assessment

For an apprentice to be ready for the end-point assessments:

- the apprentice must have achieved level 1 English and maths. The requirements for English and maths are mandatory for all apprentices aged between 16-18 at the start of their apprenticeship training. The requirements for English and maths are optional for apprentices aged 19+ at the start of their apprenticeship training.
- the apprentice must have gathered a portfolio of evidence against the required standards to be put forward as a component of the end-point assessment

- the apprentice must have achieved an approved level 2 Early Years Practitioner Qualification.
- the line manager (employer) must be confident that the apprentice has developed all the knowledge, skills and behaviours defined in the apprenticeship standard and that the apprentice is competent in performing their role. To ensure this, the apprentice must attend a formal meeting with their employer to complete the gateway readiness report.
- the apprentice and the employer should then engage with Highfield to agree a plan and schedule for each assessment activity to ensure all components can be completed within a 3-month end-assessment window. Further information about the gateway process is covered later in this kit.

If you have any queries regarding the gateway requirements, please contact your EPA Customer Engagement Manager at Highfield Assessment.

Order of end-point assessments

There is no stipulated order of assessment methods. This will be discussed with the apprentice, training provider and/or employer and our scheduling team when scheduling the assessments to ensure that the learner is provided with the best opportunity to attempt the assessment.

The Highfield approach

This section describes the approach Highfield has adopted in the development of this end-point assessment in terms of its interpretation of the requirements of the end-point assessment plan and other relevant documents.

Documents used in developing this end-point assessment

Standard (2020)

https://www.instituteforapprenticeships.org/apprenticeship-standards/early-years-practitioner v1-0

End-point assessment plan (2020 ST0888/AP01)

https://www.instituteforapprenticeships.org/media/4072/st0888_early-years-practitioner_l2_ap-for-publication_16032020.pdf

Specific considerations

Scheduling of on-site assessments **must** be booked if video recorded observations are used as part of the portfolio evidence. The viewing of video-recorded observations by the end-point assessor **must** take place on the employer's premises and the viewing can be done on the day prior to the professional discussion. Videos **must not** leave the employer's premises therefore video-recorded observations **must not** be sent to Highfield as part of the portfolio.

Gateway

How to prepare for gateway

After apprentices have completed their on-programme learning, they should be ready to pass through 'gateway' to their end-point assessment.

Gateway is a meeting that should be arranged between the apprentice, their employer and training provider to determine that the apprentice is ready to undertake their end-point assessment. The apprentice should prepare for this meeting by bringing along work-based evidence, including:

- manager statements
- customer feedback
- witness statements

As well as evidence from others, such as:

- mid and end-of-year performance reviews
- feedback to show how they have met the apprenticeship standards while on-programme

In advance of gateway, apprentices will need to have completed the following. The requirements for English and maths listed below are mandatory for all apprentices aged between 16-18 at the start of their apprenticeship training. The requirements for English and maths listed below are optional for apprentices aged 19+ at the start of their apprenticeship training.

- Achieved level 1 English.
- Achieved level 1 maths.
- Achieved an Early Years Practitioner Qualification at level 2.
- Submitted portfolio of evidence.

Therefore, apprentices should be advised by employers and providers to gather this evidence and undertake these qualifications during their on-programme training. It is recommended that employers and providers complete regular checks and reviews of this evidence to ensure the apprentice is progressing and achieving the standards before the formal gateway meeting is arranged.

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The gateway meeting

The gateway meeting should last around an hour and must be completed **on or after** the apprenticeship on-programme end date. It should be attended by the apprentice and the relevant people who have worked with the apprentice on-programme, such as the line manager/employer or mentor, the on-programme trainer/training provider and/or a senior manager (as appropriate to the business).

During the meeting, the apprentice, employer and training provider will discuss the apprentice's progress to date and confirm if the apprentice has met the full criteria of the apprenticeship standard during their on-programme training. The **Gateway Readiness Report** should be used to log the outcomes of the meeting and agreed by all 3 parties. This report is available to download from the Highfield Assessment website.

The report should then be submitted to Highfield to initiate the end-point assessment process. If you require any support completing the Gateway Readiness Report, please contact your EPA Customer Engagement Manager at Highfield Assessment.

Please note: a copy of the standard should be available to all attendees during the gateway meeting.

Reasonable adjustments and special considerations

Highfield Assessment has measures in place for apprentices who require additional support. Please refer to the Highfield Assessment Reasonable Adjustments policy for further information/guidance.

ID requirements

Highfield Assessment will need to ensure that the person undertaking an assessment is indeed the person they are claiming to be. All employers are, therefore, required to ensure that each apprentice has their identification with them on the day of the assessment so the end-point assessor can check.

Highfield Assessment will accept the following as proof of an apprentice's identity:

- a valid passport (any nationality)
- a signed UK photocard driving licence
- a valid warrant card issued by HM forces or the Police
- another photographic ID card, such as an employee ID card or travel card

The Early Years Practitioner apprenticeship standard

The following pages contain the early years practitioner apprenticeship standard and the assessment criteria in a format that is suitable for delivery.

Professional discussion underpinned by portfolio		
Knowledge	**Skills**	**Behaviour**
K4 The significance of attachment, the key person's role and how **transitions** and other significant events impact children **K6 Safeguarding policies and procedures**, including child protection and online safety. **K7** Own **role and responsibilities** in relation to safeguarding and security, including child protection, reporting and confidentiality of information. **K9 Risks and hazards** in the work setting and during off site visits. **K10** Own role and responsibilities, including reporting, in the event of a baby or young child requiring **medical/ dental attention, a non-medical incident or emergency** and identifying risks and hazards. **K11** The **work settings procedures** for receiving, storing, recording, administration and the safe disposal of medicines.	**S1** Support babies and young children through a range of **transitions** such as moving onto school, moving house or the birth of a sibling. **S2** Recognise when a child is in danger, at risk of serious harm or **abuse** and explain the **procedures to be followed to protect** them. Types of abuse including: domestic, neglect, physical, emotional, and sexual abuse. **S3** Identify **risks and hazards** in the work setting and during off site visits relating to both children and staff. **S4** Demonstrate skills and understanding for the **prevention and control of infection**, including hand washing, food preparation and hygiene, dealing with spillages safely, safe disposal of waste, using correct personal protective equipment.	**B1** Care and compassion - provide the very best childcare to every child every day combined with the ability to identify opportunities for development. **B2** Honesty, trust and integrity - develop trust by working in a confidential, ethical and empathetic manner with a common sense and professional attitude. **B3** Positive work ethic – maintains professional standards within the work environment providing a positive role model for children. **B4** Being team-focused - work effectively with colleagues and other professionals. **B5** Commitment - to improving the **outcomes** for children through inspiration and child centred care and education. **B6** Work in a **non- discriminatory way** - by being aware of differences and ensuring all children have equal access to opportunities to learn, develop and reach their potential. Work in ways

K13 The **impact of health and wellbeing on children's development**. **K14** The **current dietary guidance** for early years and why it is important for babies and young children to have a healthy balanced diet and be physically active. **K16 The statutory framework**, including the learning and development requirements for babies and young children that must be implemented by your setting. **K22** What **specialist aids, resources and equipment** are available for the children you work with and how to use these safely. **K23 Own role and expected behaviours** and the roles of colleagues and the team. **K24** How to access workplace policies and procedures and your **own responsibilities and accountabilities** relating to these. **K26** Own responsibilities when following procedures in the work setting for reporting, **whistleblowing**, protecting and promoting the welfare of children, safeguarding, confidentiality, information sharing and use of technology. **K27** The importance of **reflective practice** and continued **professional development** to improve own skills and early years practice.	**S5 Use equipment, furniture and materials safely**, following the manufacturers' instructions and setting's requirements. **S6** Encourage children to be aware of **personal safety** and the safety of others and develop **personal hygiene practices** (including oral hygiene). **S7 Promote health and wellbeing** in settings by encouraging babies and young children to consume healthy and balanced meals, snacks and drinks appropriate for their age and be physically active through planned and spontaneous activity throughout the day, both indoors and outdoors. **S8** Carry out respectful **care routines** appropriate to the development, stage, dignity and **needs** of the child, including eating (feeding and weaning/complimentary feeding), nappy changing procedures, potty/toilet training, care of skin, teeth and hair and rest and sleep provision. **S9** Communicate with all children in ways that will be understood, including **verbal and non-verbal communication**. **S10** Extend children's development and learning through **verbal and non-verbal communication**.	which consider fundamental British values including democracy, the rule of the law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs. **B7** Professional Practice – be a reflective practitioner with a commitment to continued professional development adhering to legislation, policy and procedure with a positive disposition to work.

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	S11 Encourage babies and young children to use a range of communication methods.	
	S12 Use a range of **communication methods to exchange information** with children and adults.	
	S13 Work with colleagues to identify and plan **enabling environments**, activities (both indoors and outdoors), play opportunities and educational programmes (both **adult led** and **child initiated**) to support children's **holistic development** through a range of play, creativity, social development and learning.	
	S14 Implement and review activities to support children's play, creativity, social development and learning and clear up after activities.	
	S15 Observe children, assess, plan and record the outcomes, sharing results accurately and confidentially in line with expected statutory framework and setting's requirements.	
	S16 Use **learning activities to support early language development**.	
	S17 Support children's early interest and development in mark making, writing, reading and being read to.	
	S18 Support children's interest and development in mathematical learning	

including numbers, number patterns, counting, sorting and matching.

S19 Support the assessment, planning, implementation and reviewing (the graduated approach) of each baby's and young child's individual plan for their care and participation.

S20 Work in ways that value and respect the developmental needs and stages of babies and children.

S21 Use **feedback, mentoring and/or supervision** to identify and support areas for development, goals and career opportunities.

S22 Work co-operatively with colleagues, other professionals and agencies to meet the needs of babies and young children and enable them to progress.

S23 Work alongside parents and/or carers and recognise their role in the baby's/child's health, wellbeing, learning and development.

S24 Encourage parents and/or carers to take an active role in the baby's/child's care, play, learning and development.

S25 Demonstrate how to share information with parents/carers about the importance of healthy balanced diets, looking after teeth and being physically active.

Pass criteria	Distinction criteria
PD1 Explains how they support babies and young children through a range of common **transitions**, e.g. moving home and going to school. (K4, S1, B1, B5)	**PD28** *Explains how they support the babies, young children and parents through a range of challenging transitions, e.g. the child not coping with the transition. (K4, S1, B1, B5)*
PD2 Explains how they inspire young children and adapts their approach to meet the needs of the individual child. (K4, S1, B1, B5)	**PD29** *Explains the benefits of recognising those key indicators early and the potential consequences of not doing so. (S2)*
PD3 Describes the key indicators to look for that may suggest a child is in danger or at risk of serious harm or **abuse** and the **procedures to be followed to protect** the child. (S2)	**PD30** *Describes when they have recognised an opportunity to reduce the risk of spreading infection in the setting, e.g. by educating others on good practice or making recommendations to their line manager. (S4)*
PD4 Explains their responsibility to risk assessment and describes how they fulfil that responsibility in the work setting and during off site visits. (K9, S3)	**PD31** *Explains how they adapt their communication methods or approach, as appropriate to the situation. (S9, S12)*
PD5 Explains how they carry out practices through various tasks that help the prevention and control of infection- e.g. hand washing, food preparation, dealing with spillages, disposal of waste and PPE. (S4)	**PD32** *Justifies their choice of techniques or communication methods comparing with other techniques/methods. (S10, S11, S16)*
PD6 Describes how they **use equipment, furniture and materials safely** and follows manufacturer's instructions and settings requirements fully. (S5)	**PD33** *Outlines how they take the lead to identify and plan enabling environments, activities, play opportunities and educational programmes, both indoors and outdoors to support the holistic development of children by using child initiated and adult led approaches to improve the outcomes for children. (K22, K23, S13, S22, B4)*
PD7 Outlines a variety of ways in which they support children to be aware of **personal safety** and the safety of others and to develop **personal hygiene practices**. (S6)	**PD34** *Justifies their choice of methods used to observe, assess, plan and record. (K16, S15, S19, S20, B2, B3)*
PD8 Outlines the current dietary guidance for early years and explains the ways in which they support the promotion of healthy lifestyles in line with current guidance – e.g., by encouraging babies and young children to consume healthy and balanced meals, snacks and drinks,	**PD35** *Describes when they have supported other colleagues by sharing best practices. (K27, S21, B7)*

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and /or by being physically active through planned and spontaneous activity through the day. (K14, S7, B1, B5)	
PD9 Describes how they carry out physical **care routines** to meet a child's individual **needs** in a respectful way, e.g. eating, nappy changing, potty/ toilet training, care of skin and rest and sleep. (S8)	
PD10 Explains how they **communicate** effectively through written and oral means to exchange information with both children, adults including colleagues and professionals in everyday situations. (S9, S12)	
PD11 Explains the techniques they use to extend a child's development and learning through both **verbal and non-verbal communication** and encourages the use of a range of communication methods. (S10, S11, S16)	
PD12 Outlines how they work as part of a team and with other professionals to identify and plan **enabling environments**, activities, play opportunities and educational programmes, both indoors and outdoors to support the **holistic development** of children by using **child initiated** and **adult led** approaches to improve the outcomes for children. (K22, K23, S13, S22, B4)	
PD13 Outlines which specialist aids, resources and equipment are available to aid the child's development and how they are used safely. (K22, K23, S13, S22, B4)	
PD14 Describes how they implement and review children's play, creativity, social development and learning with care and compassion and clear away after activities appropriately. (S14, B1, B3, B5)	
PD15 Describes how they share the children's **outcomes** and explains why that is appropriate to the setting. (S14, B1, B3, B5)	

PD16 Describes how they act as a positive role model to children. (S14, B1, B3, B5)	
PD17 Describes different ways in which they observe, assess, plan and record the required observational assessment in line with current curriculum guidelines and as appropriate to the setting. Uses this to help inform each child's individual education plan demonstrating respect, honesty, trust and integrity. (K16, S15, S19, S20, B2, B3)	
PD18 Describes how they use age related expectations and knowledge of stage of development to support mark making, reading, writing and being read to improve the outcomes for the children. Explain how they do this in a **non-discriminatory way**. (S17, B1, B6)	
PD19 Describes how they use age related expectations and knowledge of stage of development to support mathematical learning including numbers, number patterns, counting, sorting and matching to improve the outcomes for the children. Explain how they do this in a non-discriminatory way. (S18, B1, B5, B6)	
PD20 Explains how they use feedback, mentoring and/ or supervisions to support their **professional development** activities and identify goals and career opportunities. Explains how their **reflective practice** has improved the outcomes for children and helped them be a more successful practitioner. (K27, S21, B7)	
PD21 Describes how they engage with parents and carers to educate on matters regarding the baby's/ child's health, wellbeing, learning and development and describe the techniques they use to encourage better care and education at home. (K13, S23, S24, S25, B2, B3)	
PD22 Describes the settings policies and procedures in relation to safeguarding and child protection. (K6)	

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PD23 Describe own **role and responsibilities** in relation to safeguarding and security, including child protection, reporting and confidentiality of information. (K7) **PD24** Describes own role and responsibilities, including reporting, in the event of a baby or young child requiring **medical / dental attention**, a **non-medical incident or emergency** and identifying risks and hazards. (K10) **PD25** Describes the **work settings procedures** for receiving, storing, recording, administration and the safe disposal of medicines. (K11) **PD26** Outlines how to access work place policies and procedures and their **own responsibilities and accountabilities** relating to these. (K24) **PD27** Describes own responsibilities in terms of reporting, **whistleblowing**, protecting and promoting the welfare of children, safeguarding, confidentiality, information sharing and use of technology and their contribution in keeping children safe. (K26)	

Amplification and guidance

- **Transitions** – is an experience which most children go through in a time in their lives. This could be:
  - moving to a new home
  - starting reception, or an early years setting for the first time
  - moving from one nursery room to another, such as moving up from a baby room to a toddler room
  - the separation or divorce of parents
  - a new sibling
  - the death of a family member

- **Safeguarding policies and procedures** – the setting must have policies and procedures that the early years practitioner must follow to ensure children are protected from harm and abuse. These policies and procedures could include:

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- safeguarding children policy
- child protection policy
- use of mobile phones and cameras policy
- whistleblowing policy
- visitors policy
- arrivals and departures
- safer recruitment of staff and monitoring of staff behaviours
- confidentiality
- online safety
- prevent duty and radicalisation
- promoting positive behaviour

- **Role and responsibilities** – what the early years practitioner must do to ensure children are secure, protected from harm and abuse and the process for reporting concerns and incidents. How to keep all information confidential regarding safeguarding and security of children. How they follow the policies and procedures of the setting.

- **Risks and hazards** are the early years practitioners' responsibility, which must be carried out to prevent harm towards the children and staff in the early years setting and during off-site visits. This can impact both children and staff of the early years setting and can include:
  - slips, trips and falls
  - play equipment
  - toys and materials
  - fire safety
  - chemical hazards
  - the environment, both indoors and outdoors, including off-site

- **Medical/dental attention** – examples of medical/dental treatment could be:

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- o toothache and oral infections
- o loss of tooth
- o mild illnesses - sickness and diarrhoea; hand, foot and mouth; infestation; and chicken pox
- o high temperature
- o head injury, breaks and fractures, or cuts and wounds
- o burns and smoke inhalation
- o drowning
- o seizures
- o electrical shocks
- o choking, suffocation and strangulation
- o poisoning

- **A non-medical incident or emergency** could include:
- o gas leak
- o power cut
- o lack of heating and/or hot water
- o missing child
- o fire
- o bomb threats
- o extreme weather
- o intruder

- **Work settings procedures** are established to ensure the health and safety of the children in the setting. This can include things such as:
- o written consent and instructions from parents
- o verifying containers for medicines are prescribed for the child and are in date
- o documenting who the medication belongs to and specific instructions, including dose and times to be administered

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- o safe and secure storage
- o keeping an administration record for each child and each dose given, including signatures of who administered the medicine and the time the parent was informed
- o following local regulations and guidance on safe disposal of medicines

- **Impact of health and wellbeing on children's development** could include:
  - o physical development such as growth and motor skills and prevention of illness
  - o cognitive development for the brain to help with concentration and learning
  - o emotional development such as self-esteem, confidence and regulation
  - o social development to help socialisation and behaviour
  - o short and long-term effects

- **Current dietary guidance** focuses on providing children with a balanced and nutritious diet. This could include:
  - o UK Eatwell Guide
  - o Local initiatives

- **The statutory framework** is governed by the Early Years Foundation Stage (EYFS) and it sets out the standards for learning, development and care of children from birth to 5 years old.

- **Specialist aids, resources and equipment** could include:
  - o mobility aids such as wheelchairs
  - o adjustable tables and chairs
  - o sensory rooms and tactile toys
  - o flashcards and visual timetables
  - o low-level resources

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- **Own role and expected behaviours** of the early years practitioner is to ensure the safety, wellbeing and development of the children within the setting. Expected behaviours could include:
  - reliability
  - following policies and procedures
  - supporting interactions with children
  - clear communication with children
  - providing activities for children
  - collaboration with parents
  - supporting senior staff with observations and planning
  - professional development and reflective practice

- **Own responsibilities and accountabilities** regarding workplace policies and procedures could include:
  - compliance with policies and procedures
  - safeguarding and child protection
  - maintaining health and safety
  - providing educational and developmental support
  - engaging in personal and professional development

- **Whistleblowing** – reporting concerns relating to safeguarding or malpractice you may have in the setting – each setting should have a whistleblowing policy.

- **Reflective practice** – to look back and evaluate on own practice to identify own areas of development. This could be through:
  - appraisal/supervisions in the setting
  - a reflective diary
  - a behaviours diary

- **Professional development** – ongoing training in the early years sector to develop new knowledge and skills to progress in the role.

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- **Abuse** – the types of abuse could be:
  - physical abuse
  - psychological or emotional abuse
  - neglect
  - sexual abuse
  - cyber-bullying or online abuse

- **Procedures to be followed to protect** – the early years setting must have set procedures to follow to ensure the correct process is carried out to report any concerns in relation to children's safety. This includes legislation and guidance, such as:
  - Working together to safeguard children
  - What to do if you're worried a child is being abused: Advice for practitioners
  - The Early Years Foundation stage (EYFS) Statutory Framework
  - Keeping Children Safe in Education
  - The Counter-Terrorism and Security Act

- **Prevention and control of infection** could include:
  - handwashing
  - personal protective equipment (PPE)
  - infection control training
  - health and safety training
  - record keeping
  - reporting

- **Use equipment, furniture and materials safely** could include:
  - reading instructions thoroughly and carefully
  - inspecting all equipment, furniture and materials for any damage
  - supervising children when using the equipment

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- o cleaning and disinfecting all equipment and materials regularly
- o following safe storage practices
- o reporting any damaged equipment and resources

- **Personal safety** – to ensure the children develop knowledge and understanding of how to keep themselves safe, protecting themselves and others from harmful situations within their surroundings.

- **Personal hygiene practices** - could include:
  - o washing hands and cleanliness
  - o toileting and nappy changing
  - o oral hygiene care
  - o hair care

- **Promote health and wellbeing** for children around healthy eating could include:
  - o creating a positive atmosphere and culture
  - o helping to plan balanced meals
  - o being a role model
  - o using child-friendly portions
  - o providing choice and food-based activities
  - o developing children's understanding of healthy foods

- **Care routines** could include:
  - o toileting and nappy changing
  - o handwashing
  - o skin care
  - o oral care
  - o sleep or rest

- o   protection from exposure to sunlight and low temperatures
- o   mealtimes

- **Needs** could include:
  - o   disability needs
  - o   communication and language needs
  - o   medical needs

- **Verbal and non-verbal communication** – early years settings use many methods to communicate information with children and adults. This could include:
  - o   stories or puppets
  - o   role-play
  - o   daily diary
  - o   handover discussion at the start or end of the child's play session
  - o   sharing of child development assessment and achievements
  - o   team meetings
  - o   online apps
  - o   a newsletter or information board
  - o   emails
  - o   turn-taking
  - o   story time
  - o   interactive reading
  - o   singing
  - o   facial expressions
  - o   simple sign language
  - o   pictures and symbols
  - o   textured resources

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- o objects of reference

- **Encourage babies and young children to use a range of communication methods** could include:
  - o signing
  - o gestures
  - o body language
  - o picture symbols
  - o singing
  - o talking

- **Communication methods to exchange information** could include:
  - o two-way communication (listening and responding)
  - o consistency
  - o individualised approach
  - o with children:
    - ▪ simple language
    - ▪ body language
    - ▪ storytelling and songs
    - ▪ eye contact
    - ▪ pictures, now and next boards, and social stories
  - o with adults:
    - ▪ face-to-face conversations
    - ▪ emails
    - ▪ phone calls
    - ▪ newsletters
    - ▪ social media
    - ▪ events

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- **Enabling environments** – is a space where children can play, explore and learn in a safe and an inviting learning environment where they are able to feel emotionally safe, gain a sense of belonging and are protected from harm and abuse.

- **Adult led** – is an approach where the adult leads the learning, actively guiding and supporting the children throughout the activity or learning experience**.**

- **Child initiated** – child-initiated approach means allowing the child to initiate and lead the play themselves, which is not affected by adult motives, responsibilities and rules.

- **Holistic development** – is an approach to children's learning and development that focuses on the well-being of the child in relation to their physical, emotional, intellectual and spiritual well-being**.**

- **Implement and review activities to support children's play** could include:
  o identifying early learning goals
  o creating inviting areas
  o modelling play behaviours
  o encouraging collaboration
  o assessing learning outcomes
  o sharing insights
  o intent, implementation and impact of activity

- **Observe children, assess, plan and record the outcomes** could include:
  o checklists
  o video recordings
  o observational records such as paper-based or online
  o using frameworks relevant to the setting, such as EYFS or the company framework
  o standardised assessments

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- o parental input
- o child-centred approach
- o planning documents for supporting future learning and development

- **Learning activities to support early language development** could include:
  - o interactive storytelling
  - o nursery rhymes
  - o turn-taking
  - o role-playing
  - o outdoor play
  - o group time
  - o mealtimes

- **Support children's early interest and development in mark making, writing, reading and being read to** could include:
  - o providing opportunities to make marks, both indoors and outdoors
  - o integrating mark making with play
  - o celebrating progress
  - o read-aloud sessions
  - o promoting literacy at home
  - o expressive arts and design area

- **Support children's interest and development in mathematical learning** could include:
  - o math related play materials such as geometric shapes and puzzles
  - o counting games
  - o weighing and measuring

- **Support the assessment, planning, implementation and reviewing** could include:

- continuous observation
- developmental milestones
- parent input
- child-centred approach
- specific, measurable, achievable, relevant and time-bound (SMART) goals
- specialist input
- discussions with the key person

- **Work in ways that value and respect the developmental needs and stages** could include:
  - create safe and stimulating spaces
  - provide consistent routines
  - respond positively to interactions
  - provide emotional support
  - positive communication

- **Feedback, mentoring and/or supervision** could include:
  - self-assessment and reflection
  - goal setting
  - guidance and support from experienced colleagues
  - scheduled supervision and appraisal meetings
  - peer reviews

- **Work alongside parents and/or carers** could include:
  - good communication
  - good listening skills
  - factual information shared in regard to children's learning
  - supporting home learning through ideas and suggestions of activities

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- o participation in parent meetings/evenings

- **Outcomes** – early learning outcomes covers all aspects of children's learning and development. Early years professionals use these outcomes as guidelines when assessing a child's learning and development and to ensure the children make good progress.

- **Non-discriminatory way** – ensure children are treated equal, regardless of their protected characteristics. Legislation to help to support this could include:
  - o The Early Years Foundation Stage (EYFS) Statutory Framework
  - o Development Matters – Non-Statutory Guidance
  - o Equality legislation

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Knowledge test
Knowledge
K1 How children learn and the **expected pattern** of babies and children's development from birth to 5 years and their further development from ages 5 to 7. Areas of development include: cognitive, speech, language and communication, physical, emotional, social, brain development and literacy and numeracy
K2 The importance to children's **holistic development** of, speech, language and communication, personal, social and emotional development, physical development and literacy and numeracy
K3 How babies' and young children's learning and development can be affected by their **stage of development**, well-being and **individual circumstances**
K5 The **legal requirements** and guidance on safeguarding, security, confidentiality of information and **promoting the welfare of children**
K8 The **legal requirements** and guidance for, Health and safety and Security
K12 The **signs and symptoms** which may indicate that a child is injured, unwell (including common childhood illnesses and allergies) or in need of urgent medical/ dental attention
K15 Ways to communicate with all children **appropriate for all their stages of development**, including those whom English is an additional language (EAL) or who have delayed speech
K17 The terms **adult led activities**, **child-initiated activities** and **spontaneous experiences**
K18 The key stages in the **observation, assessment and planning cycle** and the value of observation for the child, the parents/ carers and the early years setting in **planning the next steps**
K19 How to **refer concerns** about a baby's or child's development
K20 The **statutory guidance** in relation to the care and education of children with special educational needs and disabilities
K21 Partnership working (including parents/carers) in relation to working effectively with children with special educational needs and disabilities
K25 How **behaviour** can impact on babies and children and influence them
K28 The roles and responsibilities of **other agencies and professionals** that work with and support your setting, both statutory and non-statutory
K29 The **importance** of the voice of the child, parental/carer engagement, the home learning environment and **their roles in early learning**

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Amplification and guidance

- **Expected pattern** is the expected stages in which a child develops, such as new-born development, infant and toddler development, how they learn, and how internal and external factors could influence this.

- **Holistic development** is an approach to children's overall learning and development that focuses on the well-being and independence of the child in relation to their physical, emotional, intellectual growth and spiritual well-being. How areas of learning, from sources such as the Early Years Foundation Stage and Birth to 5 Matters, can interlink, such as speech, language and communication, personal social and emotional, physical development, and literacy and numeracy skills. This could include tools such as:
  - treasure baskets
  - sensory play
  - playdough and clay
  - soft play equipment
  - puzzles and art supplies
  - imaginative play
  - nature or outdoor play

- **Stage of development** - is an age period when individual needs, behaviours, experiences and abilities are common in 1 age group.

- **Individual circumstances –** is where a child experiences something that is personal to them. This could include:
  - health
  - disability
  - death of a significant person
  - birth of sibling
  - moving house
  - transitions within nursery
  - starting or moving to a new school
  - becoming a looked-after child, adoption and care

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- o   family stress and breakdown
- o   inadequate housing and environment
- o   poverty
- o   parental choices
- o   exposure to abuse

- **Legal requirements** could include:
  - o   For safeguarding and confidentiality of information:
    - ▪   Maintaining accurate and up to date records
    - ▪   Data Protection Act and General Data Protection Regulation (GDPR)
    - ▪   Ensuring staff have an up-to-date Disclosure and Barring Certificate (DBS) check
    - ▪   Working Together to Safeguard Children
    - ▪   The Children Act
    - ▪   Early Years Foundation Stage (EYFS)
  - o   For minimising all health and safety risks such as hazards, sickness and visitors to the setting:
    - ▪   Use of and maintenance of fire extinguishers
    - ▪   Administrating medications
    - ▪   Staff to child ratios in the setting
    - ▪   Risk assessments
    - ▪   Use of personal protective equipment (PPE)

- **Promoting the welfare of children** – ensuring the safety and wellbeing of the child meeting individual needs and requirements, reporting any concerns. This could include:
  - o   protection from harm, which causes suffering and abuse
  - o   ensuring the health care needs and dietary needs of the child are met
  - o   ensuring the child's physical, emotional and educational needs are met
  - o   ensuring legislation and policies are followed, such as:

- The Counter-Terrorism and Security Act
- Disclosure and Barring Service
- Local Safeguarding Children Boards
- Working together to safeguard children
- Children Act
- Children and Social Work Act
- Early Years Foundation Stage (EYFS) Statutory Framework
- Education Act
- Health and Safety at Work etc. Act
- Protection of Children Act
- Human Rights Act
- United Nations Convention on the Rights of the Child (UNCRC)
- The Data Protection Act
- Keeping children safe in education
- Equality legislation
- Children and Families Act

- **Signs and symptoms** – illnesses and medical emergencies have common signs and symptoms that enables the diagnosis to be confirmed and treatment to be administered.
  - The word 'signs' means the visual evidence of the illness and/or medical emergency – spots, rash, paralysis, lumps and cuts or wounds.
  - The word 'symptoms' means the effects on the child and whether it is causing them chest or other pain, dizziness, nausea, stomach cramps or headache.

- **Ways to communicate** could include:
  - Visual aids such as picture cards, photographs and storyboards
  - Makaton

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- o Interactive reading
- o Sensory play
- o Dual language cards or signage
- o Tactile symbols

- **Appropriate for all their stages of development** – to ensure that what you are communicating with the child is age appropriate and is suitable for their current progress in their learning and development and meets their individual needs.

- **Adult led activities** – the adult guides the child through a learning experience, such as musical chairs.

- **Child-initiated activities** – a learning experience that children start themselves, such as interacting with others.

- **Spontaneous experiences** – where experiences arise naturally and are unplanned, usually informed by children's in-the-moment interests and curiosity from resources within the environment.

- **Observation, assessment and planning cycle** – is a process early years professionals follow to ensure they are developing and delivering high-quality education for the children in their care. It is also used to identify where early intervention is required to support children's learning.

- **Planning the next steps** – is the plan of learning to follow on from the child's current progress to enable them to develop further in their learning and development.

- **Refer concerns** – the early year's practitioner role in sharing the concerns with the relevant people regarding a baby or child's development. Relevant people could include:
  - o parents or carers
  - o speech and language therapists
  - o paediatricians

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- physiotherapists

- **Statutory guidance** - this is guidance that early years settings and professionals must follow to ensure they are working effectively with children with special educational needs and disabilities, including regular mandatory training, care plans and strategies.

- **Partnership working** – ways in which the early years setting and professionals work with other professionals, external organisations, and parents or carers to ensure the learning and development and individual needs of children with special educational needs and disabilities are met.

- **Behaviour** – conduct that can affect children in a positive or negative way, such as abusive or encouraging language, and rejection or inclusion.

- **Other agencies and professionals** could include:
  - Police
  - The National Society for the Prevention of Cruelty to Children (NSPCC)
  - Social workers
  - Speech and language therapists
  - Specialist teachers
  - Multi-agency safeguarding hub (MASH)

- **Importance** - the voice of the child means giving the child the opportunity to express their thoughts, feelings and preferences. This includes:
  - building on their confidence, self-esteem and making choices and views feel valued and respected
  - listening to children enables the practitioner to provide tailored experiences to meet their needs
  - supporting the child's emotional and social development which will help them to regulate their emotions and build on their social skills and relationships

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- the importance of parental/carer engagement provides a stronger home learning environment which enables the child to feel emotionally secure and ensures consistency and that the child's needs are met
- the importance of a home learning environment helps to enhance a child's educational experience, encourages curiosity and supports the child's emotional well-being

- **Their roles in early learning –** the voice of the child allows for interactions and communication between the children and the practitioner and allows for children with additional needs to have the right support. Engagement with parents means that they can have an active role in creating and implementing support plans for their child and also allows for activity ideas and resources to be provided to parents at home to better support their child.

Assessment summary

The end-point assessment for the Early Years Practitioner apprenticeship standard is made up of 2 components.

1. A 90-minute professional discussion underpinned by portfolio
2. A 60-minute knowledge test consisting of 40 multiple-choice questions

As an employer/training provider, you should agree a plan and schedule with the apprentice to ensure all assessment components can be completed effectively.

Each component of the end-point assessment will be assessed against the appropriate criteria laid out in this kit and a mark allocated. The grade will be determined using the combined mark.

Professional discussion underpinned by portfolio

Apprentices will be marked against the pass and distinction criteria outlined in this kit.

- To achieve a **pass**, apprentices must achieve all of the pass criteria
- To achieve a **distinction**, apprentices must achieve all of the pass criteria **and** all of the distinction criteria
- **Unsuccessful** apprentices will **not** have achieved all of the pass criteria

The professional discussion may be conducted using technology such as video link, as long as fair assessment conditions can be maintained.

Knowledge test

The total marks available for the knowledge test are 40.

- To achieve a **pass**, apprentices will score at least 26 out of 40
- To achieve a **distinction**, apprentices will score at least 32 out of 40
- **Unsuccessful** apprentices will have scored 25 or below or will not have achieved 3 out of 5 marks relating to both K5 **and** K8

Of the required pass and distinction marks, 3 out 5 questions relating to both K5 and K8 **must** be answered correctly. Apprentices will be unsuccessful if they do **not** achieve 3 out of 5 for both K5 and K8.

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The test may be delivered online or be paper-based and should be in a 'controlled' environment.

Grading

All assessment methods must be passed for the EPA to be passed overall. To achieve an overall distinction, a distinction must be achieved in the test and a distinction achieved in the professional discussion.

The grade will be determined as per the table below.

Knowledge test	Professional discussion underpinned by portfolio	Overall grade
Fail any of the 2 assessment methods		**Fail**
Pass	Pass	**Pass**
Pass	Distinction	**Pass**
Distinction	Pass	**Pass**
Distinction	Distinction	**Distinction**

Retake and resit information

Apprentices who fail one or more assessment method will be offered the opportunity to take a resit or a retake at the employer's discretion. A resit does not require further learning, whereas a retake does. If a resit is chosen, please call the Highfield scheduling team to arrange the resit. If a retake is chosen, the apprentice will require a period of further learning and will need to complete a retake checklist. Once this is completed, please call the Highfield scheduling team to arrange the retake.

Apprentices should have a supportive action plan to prepare for the resit or a retake. The apprentice's employer will need to agree that either a resit or retake is an appropriate course of action.

A resit is typically taken within 3 months of the EPA outcome notification. The timescale for a retake is dependent on how much re-training is required and is typically taken within 3 months of the EPA outcome notification. All assessment methods **must** be taken within a 6-month period, otherwise the entire EPA will need to be resat/retaken.

Resits and retakes are not offered to apprentices wishing to move from pass to distinction. Where any assessment method has to be resat or retaken, the apprentice

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will be awarded a maximum EPA grade of pass, unless Highfield determines there are exceptional circumstances requiring a resit or retake.

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Assessing the professional discussion underpinned by portfolio

In the professional discussion underpinned by portfolio, the assessor and the apprentice will have a formal two-way conversation. It will consist of the assessor asking the apprentice questions to assess their competence against the relevant criteria outlined in this kit.

Both the assessor and the apprentice **must** have access to the portfolio during the discussion. The videoed evidence, if used, **cannot** be taken off the employer's premises and may be viewed immediately before the professional discussion. The portfolio will be used by the apprentice to refer to and exemplify a point. The portfolio of evidence is **not** directly assessed.

At the start of the discussion, the independent assessor must reassure the apprentice that all information presented during the discussion will be held confidentially. The only exceptions to this will be where the child is deemed to be at risk, for example, if a safeguarding issue is described that has not been previously reported.

The professional discussion must last for **90 minutes**. The independent assessor has the discretion to increase the time of the professional discussion by up to 10% to allow the apprentice to complete their last answer.

The assessor will ask a **minimum of 10 questions**. Follow up questions may be asked to assess the apprentice's depth of understanding, skills and behaviours and authenticate their portfolio of evidence.

The professional discussion should take place in a quiet room, free from distractions and influence. The professional discussion can take place in any of the following:

- employer's premises
- a suitable venue selected by Highfield (for example a training provider's premises)

Video conferencing can be used to conduct the professional discussion, but processes must be in place. Video conferencing is only practical if the assessor has visited the employer's site to view the videoed evidence prior to the professional discussion, or if there is no video evidence.

Before the assessment:

Employers/training providers should:

- ensure the apprentice knows the date, time and location of the assessment
- ensure the apprentice knows which criteria will be assessed (outlined on the following pages)
- encourage the apprentice to reflect on their experience and learning on-programme to understand what is required to meet the standard

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- be prepared to provide clarification to the apprentice, and signpost them to relevant parts of their on-programme experience as preparation for this assessment

Grading the professional discussion underpinned by portfolio

Apprentices will be marked against the pass and distinction criteria included in the tables on the following pages (under 'Professional discussion underpinned by portfolio criteria').

- To achieve a **pass**, apprentices must achieve all of the pass criteria
- To achieve a **distinction**, apprentices must achieve all of the pass criteria **and** all of the distinction criteria
- **Unsuccessful** apprentices will have not achieved all of the pass criteria

Professional discussion underpinned by portfolio mock assessment

It is the employer/training provider's responsibility to prepare apprentices for their end-point assessment. Highfield recommends that the apprentice experiences a mock professional discussion in preparation for the real thing. The most appropriate form of mock professional discussion will depend on the apprentice's setting and the resources available at the time.

In designing a mock assessment, the employer/training provider should include the following elements in its planning:

- the mock professional discussion underpinned by portfolio of evidence should take place in a suitable location
- a **90-minute** time slot should be available to complete the professional discussion, if it is intended to be a complete professional discussion covering all relevant standards. However, this time may be split up to allow for progressive learning.
- consider a video or audio recording of the mock professional discussion and allow it to be available to other apprentices, especially if it is not practicable for the employer/training provider to carry out a separate mock assessment with each apprentice
- ensure that the apprentice's performance is assessed by a competent trainer/assessor, and that feedback is shared with the apprentice to complete the learning experience. Mock assessment sheets are available to download from the Highfield Assessment website and may be used for this purpose.

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- use a **minimum of 10 structured** 'open' questions that do not lead the apprentice but allows them to express their knowledge and experience in a calm and comfortable manner. For example:
  - professional discussion
    - provide an example of a transition you have been able to support a child with. How did you do this?
    - explain 2 key indicators that show a child is suffering from abuse.
    - provide some examples of ways that you have supported children in their awareness of their personal safety
    - how do you carry out care routines while being mindful of a child's needs?
    - how do you work with your team in the setting to provide an enabling environment for the children in your setting?
    - provide an example of when you have used feedback to support your continuous professional development.
    - provide an example of a time when you recognised an opportunity to reduce the risk of spreading infection in your setting.
    - explain how you adapt your communication methods for the children in your setting.
    - describe a method you use when observing and assessing children in your setting to plan activities.
    - provide an example of a time when you successfully supported a colleague in the setting by sharing best practice.

Professional discussion underpinned by portfolio criteria

Throughout the 90-minute professional discussion, the assessor will review the apprentice's competence in the criteria outlined below.

Professional discussion underpinned by portfolio
To pass, the following must be evidenced
PD1 Explains how they support babies and young children through a range of common transitions, e.g. moving home and going to school. (K4, S1, B1, B5)
PD2 Explains how they inspire young children and adapts their approach to meet the needs of the individual child. (K4, S1, B1, B5)
PD3 Describes the key indicators to look for that may suggest a child is in danger or at risk of serious harm or abuse and the procedures to be followed to protect the child. (S2)
PD4 Explains their responsibility to risk assessment and describes how they fulfil that responsibility in the work setting and during off site visits. (K9, S3)
PD5 Explains how they carry out practices through various tasks that help the prevention and control of infection- e.g. hand washing, food preparation, dealing with spillages, disposal of waste and PPE. (S4)
PD6 Describes how they use equipment, furniture and materials safely and follows manufacturer's instructions and settings requirements fully. (S5)
PD7 Outlines a variety of ways in which they support children to be aware of personal safety and the safety of others and to develop personal hygiene practices. (S6)
PD8 Outlines the current dietary guidance for early years and explains the ways in which they support the promotion of healthy lifestyles in line with current guidance – e.g., by encouraging babies and young children to consume healthy and balanced meals, snacks and drinks, and /or by being physically active through planned and spontaneous activity through the day. (K14, S7, B1, B5)
PD9 Describes how they carry out physical care routines to meet a child's individual needs in a respectful way, e.g. eating, nappy changing, potty/ toilet training, care of skin and rest and sleep. (S8)
PD10 Explains how they communicate effectively through written and oral means to exchange information with both children, adults including colleagues and professionals in everyday situations. (S9, S12)
PD11 Explains the techniques they use to extend a child's development and learning through both verbal and non-verbal communication and encourages the use of a range of communication methods. (S10, S11, S16)
PD12 Outlines how they work as part of a team and with other professionals to identify and plan enabling environments, activities, play opportunities and educational programmes, both indoors and outdoors to support the holistic development of children by using child initiated and adult led approaches to improve the outcomes for children. (K22, K23, S13, S22, B4)
PD13 Outlines which specialist aids, resources and equipment are available to aid the child's development and how they are used safely. (K22, K23, S13, S22, B4)

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PD14 Describes how they implement and review children's play, creativity, social development and learning with care and compassion and clear away after activities appropriately. (S14, B1, B3, B5)

PD15 Describes how they share the children's outcomes and explains why that is appropriate to the setting. (S14, B1, B3, B5)

PD16 Describes how they act as a positive role model to children. (S14, B1, B3, B5)

PD17 Describes different ways in which they observe, assess, plan and record the required observational assessment in line with current curriculum guidelines and as appropriate to the setting. Uses this to help inform each child's individual education plan demonstrating respect, honesty, trust and integrity. (K16, S15, S19, S20, B2, B3)

PD18 Describes how they use age related expectations and knowledge of stage of development to support mark making, reading, writing and being read to improve the outcomes for the children. Explain how they do this in a non-discriminatory way. (S17, B1, B6)

PD19 Describes how they use age related expectations and knowledge of stage of development to support mathematical learning including numbers, number patterns, counting, sorting and matching to improve the outcomes for the children. Explain how they do this in a non-discriminatory way. (S18, B1, B5, B6)

PD20 Explains how they use feedback, mentoring and/ or supervisions to support their professional development activities and identify goals and career opportunities. Explains how their reflective practice has improved the outcomes for children and helped them be a more successful practitioner. (K27, S21, B7)

PD21 Describes how they engage with parents and carers to educate on matters regarding the baby's/ child's health, wellbeing, learning and development and describe the techniques they use to encourage better care and education at home. (K13, S23, S24, S25, B3, B2)

PD22 Describes the settings policies and procedures in relation to safeguarding and child protection. (K6)

PD23 Describe own role and responsibilities in relation to safeguarding and security, including child protection, reporting and confidentiality of information. (K7)

PD24 Describes own role and responsibilities, including reporting, in the event of a baby or young child requiring medical / dental attention, a non-medical incident or emergency and identifying risks and hazards. (K10)

PD25 Describes the work settings procedures for receiving, storing, recording, administration and the safe disposal of medicines. (K11)

PD26 Outlines how to access work place policies and procedures and their own responsibilities and accountabilities relating to these. (K24)

PD27 Describes own responsibilities in terms of reporting, whistleblowing, protecting and promoting the welfare of children, safeguarding, confidentiality, information sharing and use of technology and their contribution in keeping children safe. (K26)

To gain a distinction, the following must be evidenced

PD28 Explains how they support the babies, young children and parents through a range of challenging transitions, e.g. the child not coping with the transition. (K4, S1, B1, B5)

PD29 *Explains the benefits of recognising those key indicators early and the potential consequences of not doing so. (S2)*

PD30 *Describes when they have recognised an opportunity to reduce the risk of spreading infection in the setting, e.g. by educating others on good practice or making recommendations to their line manager. (S4)*

PD31 *Explains how they adapt their communication methods or approach, as appropriate to the situation. (S9, S12)*

PD32 *Justifies their choice of techniques or communication methods comparing with other techniques/methods. (S10, S11, S16)*

PD33 *Outlines how they take the lead to identify and plan enabling environments, activities, play opportunities and educational programmes, both indoors and outdoors to support the holistic development of children by using child initiated and adult led approaches to improve the outcomes for children. (K22, K23, S13, S22, B4)*

PD34 *Justifies their choice of methods used to observe, assess, plan and record. (K16, S15, S19, S20, B2, B3)*

PD35 *Describes when they have supported other colleagues by sharing best practices. (K27, S21, B7)*

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Assessing the knowledge test

Apprentices must have 60 minutes to complete the test. The test consists of 40 questions. A minimum of 26 questions need to be answered correctly to pass, and a minimum mark of 32 out of 40 correctly to gain a distinction.

Of the 26 questions answered correctly, these **must** include 3 of 5 questions relating to **K5**, and 3 of 5 questions relating to **K8**.

The test is closed book which means that the apprentice cannot refer to reference books or materials.

In each paper, questions will cover each of those areas, however, not every aspect of every area will be covered in every test.

Before the assessment

The employer/training provider should:

- brief the apprentice on the areas that will be assessed by the knowledge test.

- in readiness for end-point assessment, set the apprentice a mock knowledge test. A test is available to download from the Highfield Assessment website. The mock tests are available as paper-based tests and also on the mock e-assessment system.

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Knowledge test criteria

The following pages include the criteria covered by the knowledge test.

Knowledge test
K1 How children learn and the expected pattern of babies and children's development from birth to 5 years and their further development from ages 5 to 7. Areas of development include: cognitive, speech, language and communication, physical, emotional, social, brain development and literacy and numeracy.
K2 The importance to children's holistic development of, speech, language and communication, personal, social and emotional development, physical development and literacy and numeracy.
K3 How babies' and young children's learning and development can be affected by their stage of development, well-being and individual circumstances
K5 The legal requirements and guidance on safeguarding, security, confidentiality of information and promoting the welfare of children.
K8 The legal requirements and guidance for, Health and safety and Security.
K12 The signs and symptoms which may indicate that a child is injured, unwell (including common childhood illnesses and allergies) or in need of urgent medical/ dental attention.
K15 Ways to communicate with all children appropriate for all their stages of development, including those whom English is an additional language (EAL) or who have delayed speech.
K17 The terms adult led activities, child-initiated activities and spontaneous experiences.
K18 The key stages in the observation, assessment and planning cycle and the value of observation for the child, the parents/ carers and the early years setting in planning the next steps.
K19 How to refer concerns about a baby's or child's development.
K20 The statutory guidance in relation to the care and education of children with special educational needs and disabilities
K21 Partnership working (including parents/carers) in relation to working effectively with children with special educational needs and disabilities.
K25 How behaviour can impact on babies and children and influence them.
K28 The roles and responsibilities of other agencies and professionals that work with and support your setting, both statutory and non-statutory.
K29 The importance of the voice of the child, parental/carer engagement, the home learning environment and their roles in early learning.

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