



Highfield Level 4 End-Point Assessment for ST0088 Children, Young People and Families 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 Children, Young People and Families 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 4 Children, Young People and Families 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: | Children, Young People and Families Practitioner – Practitioner in Children’s Residential Care |
| Level: | 4 |
| On programme duration: | The apprenticeship typically takes 24 months to complete (12 to 18 months for experienced practitioners) |
| End-point assessment window: | 2 months |
| Grading: | Pass/distinction |
| End-point assessment methods: | Competence interview informed by a portfolio Observation of practice |

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 Children, Young People and Families Practitioner works with children, young people and families, including carers, to achieve positive and sustainable change in their lives. They will be skilled in recognising and assessing the complex needs that children, young people and families often present and will agree with the child, young person or family any specific interventions or referrals.

Their approach will be one of respectful curiosity that challenges and supports children, young people and families to achieve their potential and stay safe. They will work alongside other professionals and organisations to share the responsibility for improving outcomes for these individuals and will regularly evaluate the effectiveness of their methods and actions.

Each piece of work with a child or family will be different and they will exercise judgement on a range of evidence-based approaches to inform their practice. Regular supervision with an experienced practitioner will encourage reflection on their practice and at the end of the apprenticeship the high quality of their practice will be making a real difference to those that they work with.

The Practitioner in Children's Residential Care pathway involves taking the lead in developing and delivering the child's placement plan and working with the child to support their health, education, social and day-to-day needs. The apprentice could work in a number of settings, including a children's home, a residential special school or a secure children's home.

On-programme requirements

Although learning, development and on-programme assessment is flexible, and the process is not prescribed, the following is the recommended baseline expectation for an apprentice to achieve full competence in line with the Children, Young People and Families Practitioner apprenticeship standard.

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 the collation of the portfolio whilst on programme, the competence interview, which will be informed by the portfolio, and the observation of practice.

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. Regular performance management/mentoring overseen by a line manager is highly recommended to ensure the consistent display of competence.

Throughout the period of learning and development, and at least every **2 months**, the apprentice should meet with the on-programme assessor to record their progress against the standard. At these reviews, evidence should be discussed and recorded by the apprentice. The maintenance of an on-programme record is important to support the apprentice, on-programme assessor and employer in monitoring the progress of learning and development. This will determine when the apprentice has achieved full competence in their job role and is therefore ready for end-point assessment.

Portfolio

While on-programme the apprentice must develop a portfolio that will inform the competence interview. Examples of the pieces of evidence that could be included are:

- **three to four** specific cases that demonstrate evidence of assessment, planning, implementation and review that the apprentice has been involved in. These could include:
 - assessments
 - action plans
 - case notes
 - supervision records
 - reports or records produced as part of a work activity
 - review of cases
 - evidence of issues and resolution in the action plans

- evidence of the values and behaviours that the apprentice has displayed while undertaking their activities. These could include:
 - witness testimonies
 - feedback from children, young people and families and partner agency colleagues
 - manager observations
- a **minimum of three** and a **maximum of five** recorded observations of practice.
- continuing professional development undertaken during the apprenticeship.

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

The required on-programme regulated qualification for this pathway of the apprenticeship is:

Level 3 Diploma for Residential Childcare

Readiness for end-point assessment

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

- the apprentice must have achieved **Level 2** English and maths.
- the apprentice must have achieved the relevant pathway qualification for this pathway of the apprenticeship.
- the apprentice must have a Disclosure and Barring Service (DBS) certificate.

- the apprentice must have developed a portfolio that showcases the relevant KSBs which can be used to inform the competence interview.
- 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 **2-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

The observation of practice will be the first method of assessment, followed by the competence interview. These assessment methods should be taken on the same day where possible.

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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

Children, Young People and Families Practitioner (2018)

<https://www.instituteforapprenticeships.org/apprenticeship-standards/children-young-people-and-families-practitioner-v1-0>

End-point assessment plan (2018 ST0088/AP01)

https://www.instituteforapprenticeships.org/media/ev5fcrqj/st0088_cypf-practitioner_l4_ap-for-publication_20230714_correction.pdf

Specific considerations

All of the evidence criteria used within the end-point assessment are based on the Children, Young People and Families Practitioner apprenticeship standard and assessment plan.

The assessment plan states some of the criteria that is assessed in both the observation of practice and the competence interview will need to be achieved in **both** assessment methods for the apprentice to pass.

However, it has been agreed that the criteria only need be achieved within **one** of the assessment methods. If circumstances in the observation of practice does **not** allow the criteria to be achieved, it **must** be assessed in the competence interview.

If the criteria **is** achieved within the observation, it does **not** need to be assessed again in the competence interview. If a pass is achieved in the observation of practice, opportunity will be given to achieve the distinction criteria in the competence interview.

Portfolio:

Apprentices are to submit a portfolio at least **3 weeks** before the competence interview is undertaken. This will support the competence interview and is **not** assessed. The evidence within their portfolio must be their own work and must have been collated during the on-programme part of their apprenticeship.

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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
- 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:

- Achieved **Level 2** English
- Achieved **Level 2** maths
- A current Disclosure and Barring Service (DBS) certificate
- **Level 3** Diploma for Residential Childcare

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.

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

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The Children, Young People and Families Practitioner apprenticeship standard

Below are the knowledge, skills and behaviours (KSBs) from the standard and related assessment criteria from the assessment plan. On-programme learning will be based upon the KSBs and the associated assessment criteria are used to assess and grade the apprentice within each assessment method.

| “You listened to me, understood what has happened to me and how I feel about my life, and I am confident my voice is heard” | |
|---|--|
| Competence interview | |
| Knowledge | |
| <p>K1.1 Communication that enables the voice of the child, young person or family members to be heard.</p> <p>K1.2 Multiple factors that contribute to uncertainty in the lives of children, young people and families.</p> <p>K1.3 Equality, rights, diversity, and cultural differences, and the values of the organisation in which you are working.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI1 Understands the basic theories underpinning the methods by which they might hear the voice of the child clearly when working with children, young people and families. (K1.1, K1.2, K1.3)</p> <p>CI2 Sound routine knowledge and understanding of the main concepts and key theories underpinning communication with children, young people and families. Recognises the barriers to communication and appreciates the complexity of the issues within a given context. (K1.1, K1.2, K1.3)</p> <p>CI3 Shows evidence of being able to evaluate own strengths and weaknesses in relation to personal and professional values. (K1.1, K1.2, K1.3)</p> | <p>CI5 Has a detailed knowledge and understanding of the theoretical concepts underpinning the practice of keeping the child at the centre of practice. Can evaluate the difficulties in hearing the voice of the child when working with families and other agencies. (K1.1, K1.2, K1.3)</p> <p>CI6 Detailed knowledge and understanding of the concepts and theories that inform the different communication strategies they might use to take into account the individual needs of children, young people and families.</p> <p>CI7 Perceptive understanding of the barriers to communication within given contexts and explicit acknowledgement of different perspectives. (K1.1, K1.2, K1.3)</p> <p>CI8 Shows evidence of insight and autonomy in evaluating own strengths and weaknesses in relation to personal and professional values. (K1.1, K1.2, K1.3)</p> |

| Skills | |
|--|--|
| <p>S1.1 Communicates in way that enables the voice of the child, young person or family members to be heard.</p> <p>S1.2 Encourages individuals to engage positively with their community and relevant agencies and actively participate in the way their care and support is delivered.</p> <p>S1.3 Actively promotes respect, equality, diversity and inclusion.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI4 Can accurately apply methods that build relationships with children, young people and families, grounded in the principle of respectful collaborative working and recognition of individual needs. Shows evidence of the voice of the child within casework. (S1.1, S1.2, S1.3)</p> | <p>CI9 Shows autonomy in building appropriate relationships with children, young people and families that helps them to develop their own resources and resilience and ensures that the voice of the child is heard as a narrative running through all casework, with evidence of taking into account the individual needs of children. (S1.1, S1.2, S1.3)</p> |
| Amplification | |
| <p>Barriers to communication – could include:</p> <ul style="list-style-type: none"> • environmental • physical • emotional • psychological • mental health • trauma • special educational needs and disability (SEND) • age and stage • vocabulary development • linguistics (dialect) <p>Context – using communication in work setting and practice (to service users, team, professionals), working with other agencies – working and communicating as a multi-agency team, working with speech and language therapists (SALT), child and adolescent mental health services (CAMHS), social care and schools.</p> | |

Different perspectives – Considering the age, culture, child/adult, advocates of the child or young person.

Individual communication and needs – such as verbal/non-verbal, technology, Makaton and picture exchange communication systems (PECS).

Communication methods and aids could include:

- verbal
- non-verbal
- sign
- pictorial
- written
- electronic/technological
- assisted

Own resources – identifying resources strategies and approaches used in the workplace could include:

- hand over books
- training
- care plans
- supervision
- appraisal
- meetings
- informal learning

Services could include:

- translation services and interpreting services
- speech and language services
- advocacy services

Equality, diversity and inclusion:

- rights and responsibilities

- legislation and safeguarding rights in law such as:
 - Equality Act 2010
 - Children Act 2004
 - Frameworks and own policies for equality and diversity
 - Inclusive practice
- the role of the advocate
- effects on children, young people and families (CYP) in cases of discrimination, stereotyping, labelling and multiple discrimination factors
- understanding and identifying a range of cultural practices, those illegal and harmful

Own role – challenging practice and knowing the procedures for complaints.

Advocates are specially trained workers who have a statutory responsibility to uphold the rights and entitlements of children and young people in care and to support them in decision making.

Discrimination may be 1 or more of the following:

- individual
- institutional
- societal

Types of discrimination could include:

- gender/transgender
- sexual orientation
- race/ethnicity
- religion
- age
- ability/disability
- health status
- physical attributes
- social circumstances

“You helped me to identify risk, you made me aware when things were unsafe”

Competence interview

Knowledge

K1.4 The range of potential safeguarding risk factors (e.g. domestic violence, membership of gangs, missing children, online activity, radicalisation and Prevent agenda), the different forms of harm to children and vulnerable adults (e.g. neglect, child sexual exploitation, physical abuse, emotional abuse) and the local and national thresholds for safeguarding.

K1.5 The safeguarding requirements contained within mandatory local safeguarding training or nationally accredited equivalent.

Pass criteria

Distinction criteria

CI10 Can explain the impact that **risk indicators of different forms of harm** can have on children and young people and their families. Understands own role and the role that other professionals have in the identification and prevention of forms of harm. (K1.4, K1.5)

CI13 Detailed knowledge and understanding of the main risk indicators of different forms of harm within **early intervention and prevention practice and own role in this**. Has awareness of ambiguities and limitations of knowledge. (K1.4, K1.5)

Skills

S1.4 Works together with children, young people and families to keep them safe and manage risk and promoting the development of skills the family need to successfully manage risk themselves.

S1.5 Works with and supports other professionals to respond to safeguarding concerns.

Pass criteria

Distinction criteria

CI11 Demonstrates the use of a sound approach to managing risk in safeguarding and protection work, based on **local and national guidelines** keeping the child and family at the centre of the process. (S1.4)
CI12 Demonstrates a joined-up approach with other professionals, to the management of risk and challenges ineffective practice. (S1.5)

CI14 Demonstrates a skilled approach to managing risk based on a critical analysis of the harm to children in **specific contexts**, and where it is safe to do so enables and supports families to cocreate their own solutions. (S1.4)
CI15 Can work effectively with other agencies to develop an effective multi agency network to manage risk, showing leadership skills where appropriate. Takes the initiative to evaluate the **practice of the network**. (S1.5)

Amplification

Risk indicators of different forms of harm – key indicators of danger of harm or abuse could include:

- lack of engagement
- withdrawal
- behaviour changes
- learnt behaviour
- inappropriate language

Understands own role and the role of other professionals in the prevention of harm. Preventions could include:

- policies and procedures
- continuing professional development (CPD) and training
- multi-agency working
- serious case reviews
- looked after child (LAC) meetings
- confidentiality
- processes

Professionals could include:

- social care
- police
- youth offending teams
- schools
- health professionals
- counsellors
- local safeguarding board
- local authority designated officer (LADO)

- designated safeguarding leads (DSL)

Understands the importance of early intervention and own practice in this.

Types of abuse could include:

- physical
- emotional
- neglect
- county lines
- sexual abuse and exploitation
- bullying
- self-harm
- neglect
- financial
- missing from care – procedure and process

Strategy – prevention and radicalisation, local area board processes and policies.

Local and national guidelines – every child matters, keeping children safe in education 2023, working together to safeguard children 2023.

Legislation – all related Ofsted and government legislation which could include:

- Working together to safeguard children 2023
- Keeping children safe in education 2023
- Children Act 2004
- Human Rights Act 1998
- Equality Act 2010
- United Nations Convention on the Rights of the Child
- Common assessment framework (CAF) assessment

Specific contexts could include:

- situations of trauma
- behaviours
- safeguarding policies and procedures
- risk assessments
- warning signs
- local and national guidelines
- policies and procedures within the setting such as whistle blowing, DBS checks and (CPD) training.

Boundaries and responsibilities could include:

- working in an open and transparent way
- listening to children and young people
- duty of care
- whistleblowing
- power and positions of trust
- propriety and behaviour
- physical contact
- intimate personal care
- off site visits
- photography and video
- use of social media
- sharing concerns and recording/reporting
- incidents
- child sexual exploitation

Practice of the network – how effective the work is in multi-agencies. The different professionals involved and collaborative working.

Actions and procedures to follow could include avoiding leading questions or putting pressure on the child or young person to disclose information.

Key people involved – those who are important to the child or young person and who can make a difference to his or her well-being. Key people include family, friends, carers and others with whom the individual has an important relationship.

| “You identified my/our strengths and difficulties and helped me learn about myself/ourselves. We prepared and made plans where we agreed the next steps together” | |
|---|--|
| Competence interview | |
| Knowledge | |
| <p>K1.6 Child, adolescent and adult development. K1.7 The spectrum of needs and how they may be met. K1.8 The principles of effective assessment and the importance of analysis and professional judgement.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI16 Demonstrates knowledge and understanding of a range of assessment skills and their associated theories in the context in which they are working. (K1.6, K.1.7, K1.8)</p> | <p>CI17 Can compare and contrast different assessment skills and their associated theories in the context of different health and social care settings. (K1.6, K.1.7, K1.8)</p> |
| Skills | |
| <p>S1.6 Identifies the influences on the individual and the family and supports them to make informed choices. S1.7 Leads on the development and recording of holistic plans, delivery of interventions and evaluates their effectiveness.</p> | |
| Observation of practice | |
| Skills | |
| <p>S1.15 Identifies and addresses barriers to accessing resources.</p> | |

| Pass criteria | Distinction criteria |
|---|--|
| <p>OP1 Shows sound and coherent argument and sustained thinking in the construction of professional analysis where the child is at the centre of the work, and develops joint workable plans and strategies based on this. (S1.15, S1.6, S.17)</p> | <p>OP2 Shows the ability to draw strands of information together into a coherent case for professional analysis and demonstrates a well formulated argument where the voice of the child is clearly at the centre of the work and negotiates jointly owned and co-created plans and strategies. (S1.15, S1.6, S1.7)</p> |
| Amplification | |
| <p>Assessment skills – understand strategies for shared thinking, person centred approaches, placing the child at the centre of their work. Understand the difference between rate and sequence of development.</p> <p>Methods of assessing development could include:</p> <ul style="list-style-type: none"> • assessment framework/s • observation • standard measurements • information from carers and colleagues • listening to the child or young person’s own account of their development <p>Interventions could include:</p> <ul style="list-style-type: none"> • social worker • speech and language therapist • psychologist • psychiatrist • youth justice • physiotherapist • nurse specialist • additional learning support • assistive technology • health visitor | |

Additional assessment knowledge to include the stage of development and level of understanding of the child or young person concerned.

Working with others could include:

- children and young people
- families/carers
- foster carers
- residential workers
- social workers
- psychologists
- doctors
- support workers
- police
- youth justice
- speech and language therapists
- other agencies

Holistic approaches could include:

- multi-agency planning and assessment processes including reviews and joint assessments
- integrated working ensures everyone combines their expertise, skills and knowledge to ensure the best possible outcomes for the child
- children benefit from integrated care and education centres have been shown to improve their behaviour, social skills and learning
- children who gain most from an integrated service include those at risk of neglect and abuse and those who attend such centres at an early age

Joint workable plans – sharing observations in the setting, working with multi-agencies and family members to inform planning of activities.

Voice of the child could include:

- listening to children's needs
- questioning
- gaining feedback from children
- working with advocates

- every child matters

Recording could include:

- observations
- sharing reviews
- different methods for assessing learning and developing and monitoring progress and developments

Theories and aspects/factors of child development – child development theories and understanding the ages and stages of development.

Aspects of development could include:

- physical
- language and communication
- intellectual/cognitive
- social, emotional and behavioural
- moral

Personal factors could include:

- health status
- disability
- sensory impairment
- learning difficulties

External factors could include:

- poverty and deprivation
- family environment and background
- neglect
- trauma
- grief and loss
- personal choices

- looked after/care status
- education

Theories of development could include:

- cognitive (Piaget)
- psychoanalytic (Freud)
- humanist (Maslow)
- social learning (Bandura)
- operant conditioning (Skinner)
- classical conditioning (Pavlov)

Frameworks to support development could include:

- social pedagogy

Early intervention for SEND and transitions could include:

- speech and language therapist
- psychologist
- psychiatrist
- youth justice
- physiotherapist
- nurse specialist
- additional learning support
- assistive technology
- health visitor

“You supported me through the changes, stuck with me and checked how things were progressing and asked whether things were better for me”

Competence interview

Knowledge

K1.9 Models for monitoring changes in a child, young person or family member’s wellbeing.

K1.10 A range of evidence-based interventions and their strengths and weaknesses.

Pass criteria

Distinction criteria

CI18 Demonstrates knowledge and understanding of a **range of interventions** and their associated theories in the context in which they are working and has evaluated their use in practice. (K1.9, K1.10)

CI21 Can compare and contrast different interventions and their associated theories in the context of different health and social care settings and has critically reflected on the evaluation of own use of specific interventions. (K1.9, K1.10)

Skills

S1.8 Identifies and manages evidence-based approaches and evaluates their effectiveness.

S1.9 Contributes to the development of a resilient, consistent and persistent approach to practice.

Pass criteria

Distinction criteria

CI19 Demonstrates tenacity, resilience and consistency in the development of plans and review for a specified range of methods of intervention. (S1.8, S1.9)

CI20 Reflects on and evaluates methods of intervention. (S1.8, S1.9)

CI22 Analyses different interventions and their associated theories in the context of different health and social care settings and demonstrates creative thinking, tenacity, resilience and consistency in the development of plans and review for specific methods of intervention. (S1.8, S1.9)

CI23 Reflects on and critically evaluates methods of intervention. (S1.8, S1.9)

Amplification

Range of interventions – case files, reviews, person centred plans and agreed interventions when a child or young person is behaving in a socially unacceptable way.

Interventions – shows that their work with children, young people and families is underpinned by a principled and professional way of working guided by a specific set of principles and values. Takes an active part in regular supervision sessions and discusses, reflects on and tests out ethical issues, conflicting information or professional disagreements and uses research, professional development and other's expertise effectively.

Therapeutic approaches could include:

- Milieu theory - therapeutic interventions

Understands – importance of their own resilience, maturity and emotional intelligence when working in a residential childcare setting. The legal context and key principles relating to physical intervention.

Compare and contrast – theories looking at why children behave in a certain way.

Evaluate – own practice and own role of intervention and reviews methods used including health plans.

Key people are those who are important to a child or young person and who can make a difference to his or her well-being. Key people include family, friends, carers and others with whom the child or young person has an important relationship.

Others could include:

- team members
- other professionals

Consistent support requires agreed responses to be made by all those involved in the care of a child or young person.

Activities should be selected to ensure they are stimulating to and achievable by the child or young person.

Agreed interventions should be designed to minimise the impact of the behaviour on the child or young person and those around them.

Physical intervention refers to methods of controlling children and young people that do not involve any use of force, such as offering a guiding hand to lead away from a harmful situation, or to block the way to prevent a child or young person putting themselves in danger.

“You weren’t afraid to make difficult decisions when you thought it was the right thing to do”

Competence interview

Knowledge

K1.11 Theories and guidelines underpinning sound practice.

Skills

S1.10 Models clarity of purpose, clear expectations and a professional approach to decision making.

S1.11 Contributes to own professional development.

Observation of practice

Knowledge

K1.15 The duties, responsibilities, boundaries and ethical nature of the role.

Pass criteria

OP3 Demonstrates critical awareness of ethical issues and cultural diversity and is able to relate these to personal beliefs and values. (K1.11, K1.15)

OP4 Sound routine knowledge and understanding of the guidance, main concepts and key theories underpinning own practice. (K1.11, K1.15)

Distinction criteria

OP6 Demonstrates critical awareness of ethical issues, cultural diversity and the diversity of values in health and social care and can draw from both theoretical and lived experience. (K1.11, K1.15)

OP7 Detailed knowledge and understanding of the main concepts and theories underpinning own practice and has an awareness of the ambiguities and limitations of this knowledge. (K1.11, K1.15)

Skills

S1.16 Appropriately challenges and/or offers alternative perspectives with the children, young person or family.

| Pass criteria | Distinction criteria |
|--|---|
| <p>OP5 There is considerable evidence of independent thinking and critical reflection and the candidate demonstrates a coherent well-informed point of view, showing some originality in drawing on relevant research, the use of a wide range of information and in the critical judgements they support. (S1.10, S1.11, S1.16)</p> | <p>OP8 Logical, articulate analysis is a consistent feature of decision making. Arguments are well articulated and logically developed using a wide range of evidence drawn from relevant research. Perceptive and persuasive points made with strong conclusions. (S1.10, S1.11, S1.16)</p> |
| Amplification | |
| <p>Ethical issues could include:</p> <ul style="list-style-type: none"> • religion • culture • appearance <p>Cultural diversity – celebrating change and individuality and providing opportunities for children to share ideas and opinions. Issues around being fair in practice.</p> <p>Diversity of values in health and social care – respecting individual choices. Beliefs and preferences. Equal opportunities, respect. Providing opportunities for education. Providing opportunities for children to be developed based on the child’s needs and capabilities.</p> <p>Relevant research – protected characteristics. Including legislation such as Equality Act, Children Act, Every Child matters.</p> <p>Critical judgements – own understanding of equality and diversity. Training and understanding of current issues such as LGBTQ+.</p> | |

“You knew what you were doing – you understood the law and knew where to find other information and helped me to form creative ideas about how to make things better”

Competence interview

Knowledge

K1.12 Systems and policy frameworks for work with children, young people and families. E.g. education, health, care, employment, criminal justice, special educational needs and disabilities, first aid, safeguarding.

Pass criteria

Distinction criteria

CI24 Understands and is able to describe the key pieces of **legislation and policy** relevant to work in health and social care and the role of **statutory codes** and can apply to accurately address, and make a consistent response to, well defined complex problems. (K1.12)

CI25 Detailed knowledge and understanding of the main key pieces of legislation and **guidance** and how this relates to their professional role, appreciating the complexity of the issues in the field. (K1.12)

Observation of practice

Skills

S1.17 Applies knowledge of legal, economic and social justice systems and implements policy frameworks in support of positive outcomes for children, young people and families.

Pass criteria

Distinction criteria

OP9 Demonstrates evidence that professional practice is underpinned and guided by up to date key legislative requirements in terms of safeguarding, health, education, youth crime, disability parental responsibility, confidentiality, information sharing and data protection. (S1.17)

OP10 Demonstrates evidence that professional practice is underpinned and guided by a sound knowledge of up to date key legislative requirements and an understanding of their tensions and conflicts, in terms of safeguarding, health, education, youth crime, disability, parental responsibility, confidentiality, information sharing and data protection. (S1.17)

Amplification

Legislation and policy – Children Act 2004, Working Together to Safeguard Children 2023, Children and Families Act 2014.

Statutory codes – key responsibilities such as: allowing children to be safe in their environment, help achieve economic stability to improve children’s lives, assist children in their quest to succeed, SEND review, special education needs and disability code of practice and Regulation 44/45.

Regulation 44 – the registered person must ensure independent visits to the home once a month under the Children’s Homes (England) Regulation 2015.

Guidance – economic side of crime, for example understanding the importance of prevention and the impact on the community. Court diversion such as working in partnership with the youth justice system and external professionals to prevent crime.

Risk management factors could include:

- the individual needs, age and abilities of the children and young people
- desired outcomes for the children and young people
- the function and purpose of the environment and the service offered lines of responsibility and accountability
- the duty of care
- social exclusion

Hazards could include:

- physical
- security
- fire
- food safety
- personal safety

| “You thought about things” | |
|---|---|
| Competence interview | |
| Knowledge | |
| <p>K1.13 The role of professional judgement and analysis in complex situations.</p> <p>K1.14 The importance of considering ethics and values, challenging self and the systems in use.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI26 Understands the role of evidence in decision making and the effective use of fact and opinion in complex situations and the importance of clear reasoning when making recommendations. (K1.13, K1.14)</p> <p>CI27 Is able to summarise the equalities requirements of own role and explain principles, values and ethical dilemmas within own area of practice. (K1.13, K1.14)</p> | <p>CI29 Understands the importance of drawing strands of information together into a coherent case for professional analysis and the use of relevant research to support critical judgements. (K1.13, K1.14)</p> <p>CI30 Has knowledge and critical understanding of the equalities requirements and ethical issues within own role and the roles of other professionals with whom they work. (K1.13, K1.14)</p> |
| Skills | |
| <p>S1.12 Demonstrates critical evaluation of practice and insight into own emotions, behaviour and feelings, and uses these insights to challenge own practice.</p> <p>S1.13 Takes an active part in continuous professional development.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI28 Takes an active part in regular supervision sessions and discusses, reflects on and tests out ethical issues, conflicting information or professional disagreements and uses research, professional development and other’s expertise effectively. (S1.12, S1.13)</p> | <p>CI31 Critical engagement in regular supervision sessions and professional development. Is receptive to new ideas and shows evidence of knowledge of an exceptionally wide range of literature that balances discussion and critically informs argument and problem solving. (S1.12, S1.13)</p> |
| Amplification | |
| <p>Evidence could include:</p> <ul style="list-style-type: none"> • professional supervision/appraisal records • witness testimonies • feedback | |

- employer statements
- ability to care
- a commitment and passion for the job
- emotional maturity
- intelligence and resilience
- core knowledge
- practical skills that are required

Reflection – the examination of personal thoughts and actions. This means focusing on how you interact with colleagues, children and the environment. It means thinking about how you could have done something differently, what you did well, what you could have done better, how you could improve what you did. It also means reflecting on your own values, beliefs and experiences which shape your thoughts and ideas.

Equalities requirements – the duties, responsibilities and boundaries of own job role.

Standards could include:

- codes of practice
- regulations
- minimum standards
- national occupational standards
- professional standards

Ethical dilemmas could include conflicts between choice and duty of care. For example, best practice means putting personal attitudes and beliefs to one side and ensure they do not impose on your work.

Other professionals could include:

- advocates
- multi agencies such as:
 - Speech and language therapists
 - Social workers
 - GPs
 - Psychologists

- Child and Adolescent Mental Health Services (CAMHS)

Range of literature – Government initiatives and guidance could include:

- Nothing about me without me
- Every Child Matters
- SEN Code of Practice 2015
- Families Act 2014 with related reading:
 - Support and aspiration: a new approach to special educational needs and disability
 - Safeguarding Disabled Children.

| “You included people who were important to me or could help me” | |
|--|---|
| Competence interview | |
| Skills | |
| <p>S1.14 Sharing and agreeing goals and outcomes when building relationships with partner organisations, other workers, children, young people and families, to ensure appropriate and timely support.</p> | |
| Pass criteria | Distinction criteria |
| <p>CI32 Demonstrates that the child/young person is well supported through effective collaborative working with clients, their families, professionals from other health and disciplines and/or other agencies. (S1.14)</p> | <p>CI33 Demonstrates that the child/young person is well supported through effective collaborative working with clients and their families and professionals from other health disciplines and/or agencies and there is evidence that these activities have been well planned, managed and organised. (S1.14)</p> |
| Observation of practice | |
| Knowledge | |
| <p>K1.16 Techniques for establishing shared goals and outcomes when building relationships with others.</p> | |

| Pass criteria | Distinction criteria |
|--|---|
| <p>OP11 Knowledge and understanding of the basic theories underpinning the methods used to gain support from others and the advantages and difficulties of including children, young people, families and communities to contribute to decision making in own area of practice. (K1.16)</p> | <p>OP12 Detailed knowledge and understanding of the theories underpinning effective co-working with children, young people and families, joint decision-making practice and co-creating plans to achieve desired outcomes. Offers good quality insights into the issues involved and relates this to their own practices of working with others. (K1.16)</p> |
| Amplification | |
| <p>Other health disciplines could include:</p> <ul style="list-style-type: none"> • GP • Dentist • Optometrist • Community nurses <p>Health needs could include:</p> <ul style="list-style-type: none"> • physical • mental • emotional • sexual <p>Evidence could include:</p> <ul style="list-style-type: none"> • assessments • action plans • case notes • reports or records produced as part of the implementation of the work activity • reviews of cases | |

- observations of practice
- education health plans

Methods used to gain support:

- coherent argument and sustained thinking in the construction of professional analysis where the child is at the centre of the work, and develops joint workable plans and strategies based on this
- a range of assessment skills and their associated theories in the context in which they are working
- interventions and plans used with individuals, groups of children and young people are evidence-based and are jointly designed, planned and regularly reviewed to ensure they meet (and continue to meet) their individual needs
- building effective relationships, working co-operatively with others, managing conflict and liaising and negotiating both within the organisation and across professions

Practitioner in children’s residential care

1a. Working with families, carers and children to devise, deliver and evaluate the effectiveness of interventions for the care and support of individual children and young people in residential care.

Competence interview

Knowledge

K1.17 The legislation and compliance requirements for residential care.
K1.18 The aspirations for a child in residential care.
K1.19 Group living and group dynamics.
K1.20 Legislation and the Code of Practice for Special Educational Needs and Disability.

Pass criteria

Distinction criteria

RC1 Understands and is able to describe the key pieces of legislation, statutory codes and guidance relevant to work in children’s residential care and can apply to address well defined problems. (K1.17, K1.18, K1.19, K1.20)
RC2 Understands **theories of attachment, child development** and the theories behind the interventions and key working used with individual and groups of children and young people including the **theories of person-centred practice**. (K1.17, K1.18, K1.19, K1.20)
RC3 Understands the techniques of assessment, matching, planning and reviewing processes. (K1.17, K1.18, K1.19, K1.20)

RC4 Detailed knowledge and understanding of the key principles, and concepts related to **law and ethics** of children’s residential care and their application to their professional role, appreciating the complexity of a range of issues within children’s residential care. (K1.17, K1.18, K1.19, K1.20)
RC5 Can evaluate different theories of attachment, child development, **theories of intervention** and key working and has critically reflected on the evaluation of own use of specific interventions and person-centred practice with children and young people. (K1.17, K1.18, K1.19, K1.20)
RC6 Has a detailed knowledge and understanding of the theoretical concepts that make for effective assessment, planning and reviewing and has an awareness of the ambiguities and limitations of the theories. (K1.17, K1.18, K1.19, K1.20)

Skills

S1.18 Assumes the role of professional parent.

| Observation in practice | |
|--|--|
| Skills | |
| <p>S1.19 Contributes to creating and reviewing placement plans based on individual need.</p> <p>S1.20 Is able to support traumatised children and young people to live together and make progress.</p> | |
| Pass criteria | Distinction criteria |
| <p>RC7 Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and are jointly designed and planned and regularly reviewed to ensure they meet and continue to meet their individual needs. (S1.18, S1.19, S1.20)</p> <p>RC8 Reflects on and evaluates methods of intervention. (S1.18, S1.19, S1.20)</p> | <p>RC9 Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and uses an exceptionally wide range of relevant research to critically inform the design, planning and interventions in individual plans. (S1.18, S1.19, S1.20)</p> <p>RC10 Shows insight and autonomy in evaluating methods of intervention. (S1.18, S1.19, S1.20)</p> |
| Amplification | |
| <p>Theories of attachment could include:</p> <ul style="list-style-type: none"> • John Bowlby (1978) • David Howe (2011) • Mary Ainsworth (1964) <p>Child development – this could include the impacts of early experiences that could influence later development so the entire future of the child can be compromised.</p> <p>Developmental problems could include:</p> <ul style="list-style-type: none"> • difficulty with processing what they hear • difficulty expressing themselves verbally • gross motor problems • delays in fine motor adaptive skills | |

Self-esteem could include:

- unable to get satisfaction from tasks well done
- see self as underserving
- see self as incapable of change
- difficulty having fun

Theories of person-centred practice – social learning theory (Bandura), personal construct theory (Kelly), hierarchy of needs (Maslow), pedagogical approaches

Law and ethics could include:

- The UN Convention on the Rights of the Child.
- Equality Act 2010.
- Care – respecting and valuing the child or young person.
- Compassion – showing consideration and concern for the child or young person.
- Courage – honesty and having a positive belief in supporting children and families. Not being afraid to challenge when faced with confrontation.
- Communication – building effective relationship and a good rapport with the child or young person.
- Competence – developed through reflective practice showing relationships built with families, children and young people.
- Commitment – demonstrating resilience and working alongside the children or young person showing commitment and supporting change.

Theories of intervention – cognitive behavioural therapies (CBT), Therapeutic Crisis Intervention (TCI), parenting interventions, family therapies. Enabling and supporting high quality relationships between professionals and children and young people can be achieved but sometimes requires changes in services, teams and processes, as well as at the level of the individual professional.

1b. Work within a team to promote the ethos of the home.

Competence interview

Knowledge

K1.21 The ethos of the home and how to create and promote it.

K1.22 Team dynamics and collaborative approach in residential environment.

Pass criteria

Distinction criteria

RC11 Understands the strategy and key principles that make the home child-oriented and understands own role in this. (K1.21)

RC12 Can identify the values, factors and processes that may hinder or facilitate collaboration and effective team activity. (K1.22)

RC14 Has detailed knowledge and understanding of the key principles, and concepts related to creating and promoting the ethos within the home and can critically reflect on their application in practice. (K1.21)

RC15 Has detailed knowledge and understanding of the concepts and key principles of the **values, factors and processes** that may hinder or facilitate collaboration and effective team activity, and can evaluate their application in practice. (K1.22)

Skills

S1.21 Develops and promotes the ethos of the home.

Pass criteria

Distinction criteria

RC13 Shows evidence of having contributed to the strategy, key principles and practices that make up the ethos of the home and meets own obligation to maintaining that ethos. (S1.21)

RC16 Contributes and works well with others, showing autonomy where necessary to realise suggestions for realistic improvements to the strategy and key principles and practices that make up the ethos of the home. Negotiates and meets all obligations to others within the home. (S1.21)

Amplification

Values, factors and processes – the team must also have a team leader who is effective and who they trust and leads in an appropriate way. Each member of the team should also:

- support and trust each other
- show accountability
- have mutual co-operation and share of knowledge, skills and abilities
- ensure individuals are given opportunities for personal development
- value and respect other members of the team
- have regular reviews of the team's performance

Teams could include and be made up of:

- co-workers
- organisational managers and supervisors
- official visitors, such as inspectorate
- other visitors
- colleagues from other agencies and services
- external partners

Demonstrate the following behaviours

Observation of practice

Compassion – Consideration and concern for children, young people and their families, combined with an understanding of the perspective of those you work with.

Courage – Honesty and a positive belief in helping children, young people and families. Being confident when faced with confrontation, holding a safe space to manage and contain really difficult behaviours and working with children, young people and families to challenge and enable them to fulfil their potential.

Communication – Your work is based on building effective relationships, being perceptive and empathic and building good rapport.

Competence interview

Care – Respecting and valuing individuals to keep them safe, being affirming and working with them to help them make a positive difference to their lives.

Competence – The relationships you build to effect change for children, young people and families will be informed by social care ethics and values and will be developed through reflective practice.

Commitment – Creating sustainable change in others by working alongside children, young people and families and being authentic, consistent, patient, persistent and resilient.

| Pass criteria | Distinction criteria |
|---|--|
| <p>B1 Shows that their work with children, young people and families is underpinned by a principled and professional way of working guided by a specific set of principles and values and shows evidence of the following:</p> <ul style="list-style-type: none"> • an active commitment to inclusion, equality of opportunity and valuing diversity. • demonstrates that the children, young people and families' particular strengths, knowledge and experience are valued. • being able to hold a compassionate position on the circumstances in which children, young people and their families find themselves, whilst at the same time ensuring that the child is safe from harm. • demonstrates a clear focus on achieving change, using a respectful, persistent, open and appropriately challenging manner to encourage and support the changes needed, and that this work is underpinned by evidence-based practice. • demonstrates inclusive communication and behaviour with clients and partner agencies. • shows evidence of monitoring and reviewing the relationships they make and reflect on how their principles, values and ways of working impact on their own beliefs and on their own practice. | <p>B2 Works very effectively and with autonomy at developing and evaluating principled practice with children, young people and families. A defined set of principles and values is evidenced throughout their casework. Shows evidence of the following:</p> <ul style="list-style-type: none"> • an active commitment to, and strong evidence across all case work, of the principles of inclusion, equality of opportunity and valuing diversity. Demonstrates an appreciation of the complexity of the range of issues involved. • skilful help and support offered children, young people and families to recognise and build on their strengths, experience and knowledge. • Builds effective relationships with children, young people and families as an integral aspect of practice, which are both compassionate and purposeful. • demonstrates skill in the use and evaluation of evidence based effective approaches which help children, young people and families effect change, Awareness of the limitations and ambiguities of the theoretical knowledge demonstrates effective and confident inclusive communication with clients and partners in a range of formats according to the context. • able to show insight and autonomy in evaluating own strengths and weaknesses in professional practice. |

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Assessment summary

The end-point assessment for the Children, Young People and Families Practitioner apprenticeship standard is made up of **2** components:

1. An observation of practice of **80-90-minute** duration
 - **10-minute** initial briefing session
 - **55-60 minutes** observation of practice
 - **15-20 minute** questions and answers session
2. A competence interview, informed by a portfolio, of **55-60-minute** duration

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.

Observation of practice

The observation of practice is weighted at 50% of the end-point assessment.

- To achieve a **pass**, apprentices must achieve all the pass criteria
- To achieve a **distinction** apprentices must achieve all the distinction criteria

The observation of practice will consist of a live setting practical example undertaken at the apprentice's normal place of work.

Competence interview informed by a portfolio

The competence interview is weighted at 50% of the end-point assessment.

- To achieve a **pass**, apprentices must achieve all the pass criteria
- To achieve a **distinction** apprentices must achieve all the distinction criteria

The observation of practice and the competence interview will typically be conducted consecutively on the same day, with the observation of practice being the first assessment method.

Criteria that **cannot** be assessed within the observation of practice will be assessed in the competence interview.

Grading

The apprenticeship includes pass and distinction grades, with the final grade based on the apprentice's combined performance in each assessment method. The overall grade for the apprentice is determined using the matrix below.

| Observation of practice | Competence interview | Overall grade |
|-------------------------|----------------------|---------------|
| Fail | Fail | Fail |
| Fail | Pass | Fail |
| Pass | Fail | Fail |
| Distinction | Fail | Fail |
| Fail | Distinction | Fail |
| Pass | Pass | Pass |
| Distinction | Pass | Pass |
| Pass | Distinction | Pass |
| Distinction | Distinction | Distinction |

Retake and resit information

If an apprentice fails an end-point assessment method, it is the apprentice's employer who will need to agree whether the apprentice will attempt a resit or retake. 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.

The decision on how much time is required is based on a discussion between the apprentice's employer and Highfield. A resit is typically taken within **3 months** of the EPA outcome notification.

The timescale for a retake is dependent on how much retraining is required and is typically taken within **6 months** of the EPA outcome notification. All assessment methods must be taken within this period, otherwise the entire EPA will need to be resat or retaken.

When undertaking a resit or retake, the assessment method(s) will need to be re-attempted in full, regardless of any individual assessment criteria that were passed on any prior attempt. The EPA report will contain feedback on areas for development and resit or retake guidance.

Apprentices who achieve a pass grade for an individual assessment method or a pass grade overall **cannot** resit or retake the EPA to achieve a higher grade.

Where any assessment method has to be resat or retaken, the apprentice will be awarded a **maximum grade of a pass**, unless there are exceptional circumstances requiring a resit or retake, as determined by Highfield.

If an apprentice fails to turn up for their assessments a fail grade will be recorded unless there are extenuating circumstances. Then the relevant Highfield policies will be followed.

Only **3** attempts to complete the end-point assessment can be made.

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Assessing the observation of practice

The observation of practice assesses the competency of the apprentice within their work environment. It will provide the apprentice the opportunity to work with or on behalf of a child or young person as both an individual and as part of a family/carer entity. They should demonstrate the application of their knowledge, skills and behaviours within this assessment method.

The observation of practice will require a live setting practical example and should reflect a frequent work activity the apprentice undertakes. The work activity could include:

- a family engagement meeting
- an early help meeting
- a parenting programme
- a visit to a home
- a multi-agency meeting
- contact with children, young people and families

The work activity should include evidence of analysis and professional judgement, practical application of and reflection on theories, models and legislation and child centred practice, and values and ethical considerations.

The observation of practice scenario will be chosen by the apprentice and agreed with the employer who will enable the provision of premises for the observation to take place and allow the end-point assessor access with the necessary safeguards and guidelines in place for live interaction with children, young people and families.

Information regarding the end-point assessment visit will be sent by the employer to the end-point assessor along with the apprentice's portfolio, outlining dates, times and expectations for the observation of practice at least **3 weeks before** the assessment is due to take place.

The end-point assessor will **not** be permitted to ask questions during the observation but will be able to expand upon their own observations to gain a greater understanding of the choices that were made by the apprentice **during** the observation, and the outcomes that are achieved, through a **15-20-minute** questions and answers session that will take place directly **after** the observation of practice.

The total assessment time for the observation is **80-90 minutes**. This includes:

10-minute initial briefing:

- the apprentice will present the **2000-word (+/10%)** summary for **10 minutes** before this assessment takes place. The initial briefing will consist of the apprentice outlining the information from the summary to the end-point assessor, including aims and objectives of the session about to be undertaken and how it will relate to the outcomes for the child or young person.

55–60-minute observation:

- the observation of practice will take place and showcase the relevant KSBs for this assessment method
- it should take place in a live workplace setting
- it should provide opportunity for the apprentice to show professional judgement, application of theories and child-centred practice

15-20-minute questions and answers session:

- the end-point assessor will ask the apprentice questions to gain:
 - further clarity on the choices made for and during the observation
 - the outcomes achieved
 - reflection from the apprentice on the content of the observation

Before the end-point assessment starts the end-point assessor will outline the purpose of their presence to the child, young person and/or family and the relevant confidentiality arrangements surrounding any information disclosed during the observation.

Assessment criteria crossover

The following criteria is assessed within the observation of practice. Where this **cannot** occur naturally in the observation, the criteria will be assessed in the competence interview.

| Ref | Criteria |
|------------|--|
| OP1 | Shows sound and coherent argument and sustained thinking in the construction of professional analysis where the child is at the centre of the work, and develops joint workable plans and strategies based on this. (S1.15) |
| OP2 | Shows the ability to draw strands of information together into a coherent case for professional analysis and demonstrates a well formulated argument where the voice of the child is clearly at the centre of the work and negotiates jointly owned and co-created plans and strategies. (S1.15) |
| OP3 | Demonstrates critical awareness of ethical issues and cultural diversity and is able to relate these to personal beliefs and values. (K1.11, K1.15) |
| OP4 | Sound routine knowledge and understanding of the guidance, main concepts and key theories underpinning own practice. (K1.11, K1.15) |
| OP5 | Demonstrates critical awareness of ethical issues, cultural diversity and the diversity of values in health and social care and can draw from both theoretical and lived experience. (S1.10, S1.11, S1.16) |
| OP6 | Detailed knowledge and understanding of the main concepts and theories underpinning own practice and has an awareness of the ambiguities and limitations of this knowledge. (K1.11, K1.15) |
| OP7 | There is considerable evidence of independent thinking and critical reflection and the candidate demonstrates a coherent well-informed point of view, showing some originality in drawing on relevant research, the use of a wide |

| | |
|-------------|--|
| | range of information and in the critical judgements they support. (K1.11, K1.15) |
| OP8 | Logical, articulate analysis is a consistent feature of decision making. Arguments are well articulated and logically developed using a wide range of evidence drawn from relevant research. Perceptive and persuasive points made with strong conclusions. (S1.10, S1.11, S1.16) |
| RC7 | Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and are jointly designed and planned and regularly reviewed to ensure they meet and continue to meet their individual needs. (S1.19, S1.20) |
| RC8 | Reflects on and evaluates methods of intervention. (S1.19, S1.20) |
| RC9 | Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and uses an exceptionally wide range of relevant research to critically inform the design, planning and interventions in individual plans. (S1.19, S1.20) |
| RC10 | Shows insight and autonomy in evaluating methods of intervention. (S1.19, S1.20) |
| C1 | Demonstrates a broad understanding of theories of partnership, partnership philosophies and practices of partnership and links this to their own role. |
| C3 | Demonstrates a detailed understanding of the theoretical concepts underpinning effective partnership working, with evidence of independent and original good quality insight into the issues. |
| B1 | Shows that their work with children, young people and families is underpinned by a principled and professional way of working guided by a specific set of principles and values and shows evidence of the following: <ul style="list-style-type: none"> • an active commitment to inclusion, equality of opportunity and valuing diversity. • demonstrates that the children, young people and families' particular strengths, knowledge and experience are valued. • being able to hold a compassionate position on the circumstances in which children, young people and their families find themselves, whilst at the same time ensuring that the child is safe from harm. • demonstrates a clear focus on achieving change, using a respectful, persistent, open and appropriately challenging manner to encourage and support the changes needed, and that this work is underpinned by evidence-based practice. • demonstrates inclusive communication and behaviour with clients and partner agencies. • shows evidence of monitoring and reviewing the relationships they make and reflect on how their principles, values and ways of working impact on their own beliefs and on their own practice. |
| B2 | Works very effectively and with autonomy at developing and evaluating principled practice with children, young people and families. A defined set of principles and values is evidenced throughout their casework. Shows evidence of the following: |

| | |
|--|---|
| | <ul style="list-style-type: none"> • an active commitment to, and strong evidence across all case work, of the principles of inclusion, equality of opportunity and valuing diversity. Demonstrates an appreciation of the complexity of the range of issues involved. • skilful help and support offered children, young people and families to recognise and build on their strengths, experience and knowledge. • Builds effective relationships with children, young people and families as an integral aspect of practice, which are both compassionate and purposeful. • demonstrates skill in the use and evaluation of evidence based effective approaches which help children, young people and families effect change, Awareness of the limitations and ambiguities of the theoretical knowledge demonstrates effective and confident inclusive communication with clients and partners in a range of formats according to the context. • able to show insight and autonomy in evaluating own strengths and weaknesses in professional practice. |
|--|---|

Before the assessment

Employers/training providers should:

- ensure the apprentice knows the date, time and location of the assessment
- ensure the apprentice knows which Children, Young People and Families Practitioner 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 and identify real-life examples
- be prepared to provide clarification to the apprentice, and signpost them to relevant parts of their on-programme experience as preparation for this assessment
- support the apprentice when choosing their observation scenario
- enable provision of the premises for the assessment to take place, and access for the end-point assessor
- ensure that safeguarding measures are in place for live interactions with children, young people and families

Observation of practice 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 observation of practice in advance of the end-point assessment with the training provider/employer giving feedback on any areas for improvement.

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

- the mock observation should take place in a live setting such as:
 - a family engagement meeting
 - an early help meeting
 - a parenting programme
 - a visit to a home
 - a multi-agency meeting
- **80-90-minute** time slot should be available for the observation, if it is intended to be a complete mock observation covering all relevant standards (outlined in the following pages). This should include time for the **10-minute** initial briefing and the **20-minute** questions and answers session. However, this time may be split up to allow for progressive learning and is in addition to the **55–60-minute** observation.
- consider a video or audio recording of the mock observation 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 observation 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.
- in the **20-minute** questions and answers session use structured 'open' questions that do not lead the apprentice but allows them to give examples for how they have met each area in the standard. For example:
 - Explain how you create a coherent case for professional analysis where the voice of the child is at the centre of the work.
 - Describe which theories underpin your own professional practice.
 - Explain how your professional practice is underpinned and guided by up-to-date key legislation.
 - Explain which theories underpin effective co-working with children, young people and families to achieve the desired outcomes.
 - Describe what research you used to critically inform the design, planning and interventions in plans used for individuals and groups.

Observation of practice criteria

Throughout the **80-90-minute** observation of practice, the end-point assessor will review the apprentice's competence in the criteria outlined below.

Apprentices should prepare for the observation of practice by considering how the criteria can be met.

| <p align="center">“You identified my/our strengths and difficulties and helped me learn about myself/ourselves. We prepared and made plans where we agreed the next steps together”</p> <p align="center">Knowledge</p> | |
|--|---|
| Pass criteria | Distinction criteria |
| <p>OP1 Shows sound and coherent argument and sustained thinking in the construction of professional analysis where the child is at the centre of the work, and develops joint workable plans and strategies based on this. (S1.15)</p> | <p>OP2 Shows the ability to draw strands of information together into a coherent case for professional analysis and demonstrates a well formulated argument where the voice of the child is clearly at the centre of the work and negotiates jointly owned and co-created plans and strategies. (S1.15)</p> |

| <p align="center">“You weren't afraid to make difficult decisions when you thought it was the right thing to do”</p> <p align="center">Knowledge</p> | |
|--|--|
| Pass criteria | Distinction criteria |
| <p>OP3 Demonstrates critical awareness of ethical issues and cultural diversity and is able to relate these to personal beliefs and values. (K1.11, K1.15)</p> <p>OP4 Sound routine knowledge and understanding of the guidance, main concepts and key theories underpinning own practice. (K1.11, K1.15)</p> | <p>OP6 Demonstrates critical awareness of ethical issues, cultural diversity and the diversity of values in health and social care and can draw from both theoretical and lived experience. (K1.11, K1.15)</p> <p>OP7 Detailed knowledge and understanding of the main concepts and theories underpinning own practice and has an awareness of the ambiguities and limitations of this knowledge. (K1.11, K1.15)</p> |
| Skills | |
| <p>OP5 There is considerable evidence of independent thinking and critical reflection and the candidate demonstrates a coherent well-informed point of view, showing some originality in drawing on relevant research, the use of a wide range of information and in the critical judgements they support. (S1.10, S1.11, S1.16)</p> | <p>OP8 Logical, articulate analysis is a consistent feature of decision making. Arguments are well articulated and logically developed using a wide range of evidence drawn from relevant research. Perceptive and persuasive points made with strong conclusions. (S1.10, S1.11, S1.16)</p> |

“You knew what you were doing – you understood the law and knew where to find other information and helped me to form creative ideas about how to make things better”

Skills

| Pass criteria | Distinction criteria |
|---|--|
| OP9 Demonstrates evidence that professional practice is underpinned and guided by up to date key legislative requirements in terms of safeguarding, health, education, youth crime, disability parental responsibility, confidentiality, information sharing and data protection. (S1.17) | OP10 Demonstrates evidence that professional practice is underpinned and guided by a sound knowledge of up to date key legislative requirements and an understanding of their tensions and conflicts, in terms of safeguarding, health, education, youth crime, disability, parental responsibility, confidentiality, information sharing and data protection. (S1.17) |

“You included people who were important to me or could help me”

Knowledge

| Pass criteria | Distinction criteria |
|--|---|
| OP11 Knowledge and understanding of the basic theories underpinning the methods used to gain support from others and the advantages and difficulties of including children, young people, families and communities to contribute to decision making in own area of practice. (K1.16) | OP12 Detailed knowledge and understanding of the theories underpinning effective co-working with children, young people and families, joint decision-making practice and co-creating plans to achieve desired outcomes. Offers good quality insights into the issues involved and relates this to their own practices of working with others. (K1.16) |

1a. Working with families, carers and children to devise, deliver and evaluate the effectiveness of interventions for the care and support of individual children and young people in residential care.

Skills

| Pass criteria | Distinction criteria |
|---|---|
| RC7 Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and are jointly designed and planned and regularly reviewed to ensure they meet and continue to meet their individual needs. (S1.19, S1.20) RC8 Reflects on and evaluates methods of intervention. (S1.19, S1.20) | RC9 Shows evidence that the interventions and plans used with individuals and groups of children and young people are evidence-based and uses an exceptionally wide range of relevant research to critically inform the design, planning and interventions in individual plans. (S1.19, S1.20) RC10 Shows insight and autonomy in evaluating methods of intervention. (S1.19, S1.20) |

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Assessing the competence interview

The competence interview is a structured discussion between the apprentice and the end-point assessor which will be focused on the work produced in the portfolio.

The end-point assessor will look at the work the apprentice has undertaken to explore aspects such as how and why the work was carried out, the strengths the apprentice has demonstrated, and to ask probing questions to cover any gaps or weaknesses in the apprentice's knowledge, skills or behaviours.

The total assessment time for the competence interview is **55-60 minutes** (+/-10%).

The portfolio is **not** assessed but will be used to inform the questioning in the interview. The apprentice and the end-point assessor should both have access to the portfolio during the interview.

Apprentices should give examples and specific explanations from their portfolio of how they have used their knowledge, skills and behaviours in a relevant real-life situation and base their answers on prior experience. They will be awarded a grade based on their coverage of the relevant assessment criteria covered in the following pages.

The competence interview is weighted at 50% of the end-point assessment.

- To achieve a **pass**, apprentices must achieve all the pass criteria
- To achieve a **distinction** apprentices must achieve all the distinction criteria

Highfield would encourage the employer/training provider and the apprentice to plan for the interview by familiarising themselves with the skills criteria that will be assessed and reflect on their experience in a Children, Young People and Families Practitioner role. The competence interview will also allow apprentices to cover any remaining criteria they were not able to cover in the observation of practice.

Employers and training providers can be present during the assessment, however, this is **not** compulsory. They will **not** be allowed to assist the apprentice in any way during the assessment.

Before the assessment

Employers/training providers should:

- ensure the apprentice knows the date, time and location of the assessment
- ensure the apprentice knows which Children, Young People and Families Practitioner 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 and identify real-life examples

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

Competence interview 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 competence interview in advance of the end-point assessment with the training provider/employer giving feedback on any areas for improvement.

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

- the mock interview should take place in a suitable location.
- a **55-60 minute** time slot should be available for the interview, if it is intended to be a complete mock interview covering all relevant standards (outlined in the following pages).
- consider a video or audio recording of the mock interview 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 interview 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.
- in the interview use structured 'open' questions that do not lead the apprentice but allows them to give examples for how they have met each area in the standard. For example:
 - Describe a specific safeguarding risk to children.
 - Explain how you would meet a child's development needs.
 - Explain what theoretical model you consider when monitoring changes in a child's wellbeing.
 - Describe an intervention you have had to use and its associated theory in the context of a health and social care setting.
 - Explain a framework for working with children.
 - Why is it important to consider ethics within your role?
 - Explain how you agree outcomes when building relationships with other workers.
 - Describe what values your organisation upholds.
 - How do you ensure you are enabling the voices of the children in your care?

Competence interview criteria

Throughout the **55-60 minute** interview, the end-point assessor will review the apprentice's competence in the criteria outlined below.

Apprentices should prepare for the competence interview by considering how the criteria can be met.

| "You listened to me, understood what has happened to me and how I feel about my life, and I am confident my voice is heard" | |
|--|--|
| Knowledge | |
| Pass criteria | Distinction criteria |
| <p>CI1 Understands the basic theories underpinning the methods by which they might hear the voice of the child clearly when working with children, young people and families. (K1.1, K1.2, K1.3)</p> <p>CI2 Sound routine knowledge and understanding of the main concepts and key theories underpinning communication with children, young people and families. Recognises the barriers to communication and appreciates the complexity of the issues within a given context. (K1.1, K1.2, K1.3)</p> <p>CI3 Shows evidence of being able to evaluate own strengths and weaknesses in relation to personal and professional values. (K1.1, K1.2, K1.3)</p> | <p>CI5 Has a detailed knowledge and understanding of the theoretical concepts underpinning the practice of keeping the child at the centre of practice. Can evaluate the difficulties in hearing the voice of the child when working with families and other agencies. (K1.1, K1.2, K1.3)</p> <p>CI6 Detailed knowledge and understanding of the concepts and theories that inform the different communication strategies they might use to take into account the individual needs of children, young people and families. (K1.1, K1.2, K1.3)</p> <p>CI7 Perceptive understanding of the barriers to communication within given contexts and explicit acknowledgement of different perspectives. (K1.1, K1.2, K1.3)</p> <p>CI8 Shows evidence of insight and autonomy in evaluating own strengths and weaknesses in relation to personal and professional values. (K1.1, K1.2, K1.3)</p> |
| Skills | |
| <p>CI4 Can accurately apply methods that build relationships with children, young people and families, grounded in the principle of respectful collaborative working and recognition of individual needs. Shows evidence of the voice of the child within casework. (S1.1, S1.2, S1.3)</p> | <p>CI9 Shows autonomy in building appropriate relationships with children, young people and families that helps them to develop their own resources and resilience and ensures that the voice of the child is heard as a narrative running through all casework, with evidence of taking into account the individual needs of children. (S1.1, S1.2, S1.3)</p> |

“You helped me to identify risk, you made me aware when things were unsafe”

Knowledge

Pass criteria

Distinction criteria

| | |
|--|---|
| <p>CI10 Can explain the impact that risk indicators of different forms of harm can have on children and young people and their families. Understands own role and the role that other professionals have in the identification and prevention of forms of harm. (K1.4, K1.5)</p> | <p>CI13 Detailed knowledge and understanding of the main risk indicators of different forms of harm within early intervention and prevention practice and own role in this. Has awareness of ambiguities and limitations of knowledge. (K1.4, K1.5)</p> |
|--|---|

Skills

| | |
|---|---|
| <p>CI11 Demonstrates the use of a sound approach to managing risk in safeguarding and protection work, based on local and national guidelines keeping the child and family at the centre of the process. (S1.4)</p> <p>CI12 Demonstrates a joined-up approach with other professionals, to the management of risk and challenges ineffective practice. (S1.5)</p> | <p>CI14 Demonstrates a skilled approach to managing risk based on a critical analysis of the harm to children in specific contexts, and where it is safe to do so enables and supports families to cocreate their own solutions. (S1.4)</p> <p>CI15 Can work effectively with other agencies to develop an effective multi agency network to manage risk, showing leadership skills where appropriate. Takes the initiative to evaluate the practice of the network. (S1.5)</p> |
|---|---|

“You identified my/our strengths and difficulties and helped me learn about myself/ourselves. We prepared and made plans where we agreed the next steps together”

Knowledge

Pass criteria

Distinction criteria

| | |
|---|--|
| <p>CI16 Demonstrates knowledge and understanding of a range of assessment skills and their associated theories in the context in which they are working. (K1.6, K1.7, K1.8)</p> | <p>CI17 Can compare and contrast different assessment skills and their associated theories in the context of different health and social care settings. (K1.6, K1.7, K1.8)</p> |
|---|--|

“You supported me through the changes, stuck with me and checked how things were progressing and asked whether things were better for me”

Knowledge

Pass criteria

Distinction criteria

| | |
|--|---|
| <p>CI18 Demonstrates knowledge and understanding of a range of interventions and their associated theories in the context in which they are working and has evaluated their use in practice. (K1.9, K1.10)</p> | <p>CI21 Can compare and contrast different interventions and their associated theories in the context of different health and social care settings and has critically reflected on the evaluation of own use of specific interventions. (K1.9, K1.10)</p> |
|--|---|

Skills

| | |
|---|---|
| <p>CI19 Demonstrates tenacity, resilience and consistency in the development of plans and</p> | <p>CI22 Analyses different interventions and their associated theories in the context of different health and social care settings and demonstrates</p> |
|---|---|

“You supported me through the changes, stuck with me and checked how things were progressing and asked whether things were better for me”

Knowledge

| Pass criteria | Distinction criteria |
|---|--|
| review for a specified range of methods of intervention. (S1.8, S1.9) CI20 Reflects on and evaluates methods of intervention. (S1.8, S1.9) | creative thinking, tenacity, resilience and consistency in the development of plans and review for specific methods of intervention. (S1.8, S1.9) CI23 Reflects on and critically evaluates methods of intervention. (S1.8, S1.9) |

“You knew what you were doing – you understood the law and knew where to find other information and helped me to form creative ideas about how to make things better”

Knowledge

| Pass criteria | Distinction criteria |
|---|---|
| CI24 Understands and is able to describe the key pieces of legislation and policy relevant to work in health and social care and the role of statutory codes and can apply to accurately address, and make a consistent response to, well defined complex problems. (K1.12) | CI25 Detailed knowledge and understanding of the main key pieces of legislation and guidance and how this relates to their professional role, appreciating the complexity of the issues in the field. (K1.12) |

“You thought about things”

Knowledge

| Pass criteria | Distinction criteria |
|---|---|
| CI26 Understands the role of evidence in decision making and the effective use of fact and opinion in complex situations and the importance of clear reasoning when making recommendations. (K1.13, K1.14) CI27 Is able to summarise the equalities requirements of own role and explain principles, values and ethical dilemmas within own area of practice. (K1.13, K1.14) | CI29 Understands the importance of drawing strands of information together into a coherent case for professional analysis and the use of relevant research to support critical judgements. (K1.13, K1.14) CI30 Has knowledge and critical understanding of the equalities requirements and ethical issues within own role and the roles of other professionals with whom they work. (K1.13, K1.14) |

Skills

| | |
|--|--|
| CI28 Takes an active part in regular supervision sessions and discusses, reflects on and tests out ethical issues, conflicting information or professional disagreements and uses research, professional development and other’s expertise effectively. (S1.12, S1.13) | CI31 Critical engagement in regular supervision sessions and professional development. Is receptive to new ideas and shows evidence of knowledge of an exceptionally wide range of literature that balances discussion and critically informs argument and problem solving. (S1.12, S1.13) |
|--|--|

“You included people who were important to me or could help me”

Skills

| Pass criteria | Distinction criteria |
|--|--|
| CI32 Demonstrates that the child/young person is well supported through effective collaborative working with clients, their families, professionals from other health and disciplines and/or other agencies. (S1.14) | CI33 Demonstrates that the child/young person is well supported through effective collaborative working with clients and their families and professionals from other health disciplines and/or agencies and there is evidence that these activities have been well planned, managed and organised. (S1.14) |

1a. Working with families, carers and children to devise, deliver and evaluate the effectiveness of interventions for the care and support of individual children and young people in residential care.

Knowledge

| Pass criteria | Distinction criteria |
|--|---|
| RC1 Understands and is able to describe the key pieces of legislation, statutory codes and guidance relevant to work in children’s residential care and can apply to address well defined problems. (K1.17, K1.18, K1.19, K1.20) RC2 Understands theories of attachment, child development and the theories behind the interventions and key working used with individual and groups of children and young people including the theories of person-centred practice. (K1.17, K1.18, K1.19, K1.20) RC3 Understands the techniques of assessment, matching, planning and reviewing processes. (K1.17, K1.18, K1.19, K1.20) | RC4 Detailed knowledge and understanding of the key principles, and concepts related to law and ethics of children’s residential care and their application to their professional role, appreciating the complexity of a range of issues within children’s residential care. (K1.17, K1.18, K1.19, K1.20) RC5 Can evaluate different theories of attachment, child development, theories of intervention and key working and has critically reflected on the evaluation of own use of specific interventions and person-centred practice with children and young people. (K1.17, K1.18, K1.19, K1.20) RC6 Has a detailed knowledge and understanding of the theoretical concepts that make for effective assessment, planning and reviewing and has an awareness of the ambiguities and limitations of the theories. (K1.17, K1.18, K1.19, K1.20) |

1b. Work within a team to promote the ethos of the home.

Knowledge

| Pass criteria | Distinction criteria |
|---|--|
| RC11 Understands the strategy and key principles that make the home child-oriented and understands own role in this (K1.21) RC12 Can identify the values, factors and processes that may hinder or facilitate collaboration and effective team activity. (K1.21) | RC14 Has detailed knowledge and understanding of the key principles, and concepts related to creating and promoting the ethos within the home and can critically reflect on their application in practice (K1.21) RC15 Has detailed knowledge and understanding of the concepts and key principles of the values, |

1b. Work within a team to promote the ethos of the home.

Knowledge

Pass criteria

Distinction criteria

| | |
|--|--|
| | factors and processes that may hinder or facilitate collaboration and effective team activity, and can evaluate their application in practice. (K1.21) |
| Skills | |
| RC13 Shows evidence of having contributed to the strategy, key principles and practices that make up the ethos of the home and meets own obligation to maintaining that ethos. (K1.22) | RC16 Contributes and works well with others, showing autonomy where necessary to realise suggestions for realistic improvements to the strategy and key principles and practices that make up the ethos of the home. Negotiates and meets all obligations to others within the home. (S1.21) |

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