# All Wales Induction Framework for Early Years and Childcare

## Section 2 – Health, well-being, learning, development and play

This section will help you explore the role that you as an early years and childcare worker have in promoting children’s health and well-being.

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Glossary

## Progress log for health, well-being, learning, development and play

## 2.1 Factors that affect health, well-being, learning, development and play

**Factors that impact upon the health, well-being, play, learning and development of children**

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| **2.1a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| The different stages of child development (0-19 years) |  |  |  |
| The range of **factors that may affect the health, well-being and personal, physical, social and emotional development** of **children** and the impact this may have on them |  |  |  |
| Adverse childhood experiences and how these can impact children’s health, well-being, learning and development |  |  |  |
| What is meant by the term ‘attachment’ and be able to describe why this is an important element of development and the ability of children to form relationships |  |  |  |
| What is meant by the term ‘resilience’ and be able to describe why this is important for the well-being and development of children |  |  |  |
| The importance of self-identity, self-esteem, sense of security and belonging for the well-being and development of children |  |  |  |
| What children need to learn, develop, play and stay healthy – physically, mentally and emotionally |  |  |  |
| The range of agencies and workers that may be involved in supporting the health, well-being, learning and development of children |  |  |  |
| The links between intellectual, physical and emotional growth and how to support the development of these |  |  |  |
| How **curriculum areas** support the **holistic development** of children |  |  |  |
| The importance of engagement in meaningful and enjoyable activities on well-being and the development of intellectual, physical and emotional growth |  |  |  |
| How to use every-day routines and developmentally appropriate activities, materials and first-hand experiences to support the health, well-being and learning and development of children |  |  |  |
| The importance of **creative development** for the health, well-being, learning and development of children |  |  |  |
| What is meant by the term ‘learning experiences’ |  |  |  |
| How development is supported by learning experiences |  |  |  |
| The importance of promoting families’/ carers’ self-confidence in the parenting role and developing their ability to relate positively and engage in play activities with their child |  |  |  |
| How the structure of families and arrangements for the care of a child can impact upon their view of the world and sense of well-being |  |  |  |
| The importance of early intervention and partnership working for the health, well-being and learning and development of children |  |  |  |
| The role of relationships and support networks in supporting the well-being of children |  |  |  |
| Ways of working that develop positive relationships with children and families / carers based on trust, respect and compassion |  |  |  |
| The types of changes in a child that would give cause for concern |  |  |  |
| The importance of observing, monitoring and recording the development of children |  |  |  |
| The use of **development and assessment frameworks** in observing, monitoring and recording the development of children |  |  |  |

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| **2.1b Additional AWIFEYCC learning outcomes****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Promote ways of working with children that support them to participate in a range of activities and experiences, and make developmental progress at a level appropriate to their age, needs and abilities |  |  |  |
| Support children in ways that promote their self-esteem, sense of security and belonging |  |  |  |
| Support children to recognise and celebrate their abilities, talents and achievements |  |  |  |

## 2.2 Positive environments for the health, well-being, learning, development and play of children

**The value of arranging and using environments to support the health, well-being, play, learning and development of children**

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| **2.2a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| The regulatory requirements for environments in early years settings |  |  |  |
| The features of a positive **environment** |  |  |  |
| How the environment can support the **holistic development** of children |  |  |  |
| How the environment can support development of children in line with **curriculum frameworks and curriculum areas** |  |  |  |
| How the environment can support the inclusion of all children in the setting including those with additional needs |  |  |  |
| The importance of ensuring that the environment is welcoming, nurturing, safe, clean, stimulating and takes account of children's needs, interests and preferences |  |  |  |
| The importance of balancing periods of physical activity with rest and quiet time for the health, well-being and development of children |  |  |  |
| The importance of consistent routines for children's well-being and development |  |  |  |

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| **2.2b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Support a positive and safe environment that meets the health, well-being, development and individual needs of children |  |  |  |
| Contribute to the planning and organisation of a positive and safe environment that supports children’s development  |  |  |  |
| Provide a safe, caring, nurturing and responsive environment that values children and their families |  |  |  |

## 2.3 Play

**The role of play in supporting the health, well-being, learning and development of children**

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| **2.3a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| What is meant by the term 'playwork principles' |  |  |  |
| The importance of play for children’s health, well-being, learning and development |  |  |  |
| The role ‘play’ has in a child’s understanding of themselves |  |  |  |
| The **different types of play** and their benefits |  |  |  |
| How the environment and choice of equipment and materials are used to support play |  |  |  |
| How to support holistic development through play |  |  |  |
| How play assists children’s learning about themselves, those around them and the wider environment |  |  |  |
| How children may use play to express emotions, fears, anxieties or copy behaviour they have observed |  |  |  |
| How to involve children in the creation of different types of play spaces |  |  |  |
| How to identify if a play space is stimulating, challenging, restful or relaxing |  |  |  |
| Why risk is important in play and how to encourage, and support acceptable levels of risk |  |  |  |
| How to balance risk-taking with the developmental benefits to children’s health, well-being, learning and development. |  |  |  |

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| **2.3b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Provide a range of opportunities for different types of play |  |  |  |
| Adapt the environment and activities to ensure that every child is able to participate |  |  |  |
| Meet the individual needs and preferences of children |  |  |  |

## 2.4 Communication development

**How to support speech, language and communication development**

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| **2.4a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| The importance of speech, language and communication for children’s well-being, learning and development |  |  |  |
| The impact of speech, language and communication difficulties on the development of children |  |  |  |
| The importance of early intervention for speech, language and communication delays and disorders |  |  |  |
| How multi-agency teams work together to support speech, language and communication development |  |  |  |
| Ways in which adults can support speech, language and communication development of children |  |  |  |
| How play and activities are used to support the development of speech, language and communication |  |  |  |

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| **2.4b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Take account of the speech and language communication needs of children |  |  |  |

## 2.5 Additional support needs

**Support the health, well-being, learning and development of children with additional support needs**

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| **2.5a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| Legal frameworks that apply to the provision of services to children with additional needs |  |  |  |
| The types of **additional support needs** that children may have |  |  |  |
| How to support more able and talented children and how these children may require additional support |  |  |  |
| How to find out about the additional support needs of children |  |  |  |
| The principles of inclusion for children with additional support needs |  |  |  |
| How to adapt activities to enable all children to take part |  |  |  |

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| **2.5b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Take account of any additional support needs children may have |  |  |  |

## 2.6 Personal care of children

**How to support children with their physical care**

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| **2.6a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| The importance of supporting physical care routines for children |  |  |  |
| How to treat children with dignity and respect when supporting them with their physical care routines taking into account their background, culture and religion |  |  |  |
| How to support children with their physical care routines in a way that protects both the child and adults who care for them |  |  |  |
| How to care for children’s skin, hair and teeth |  |  |  |
| Where to access additional information, advice and support for the physical care routines of children |  |  |  |

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| **2.6b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Support personal care routines that meet the individual needs of children |  |  |  |
| Support the personal care routines of children in a way that treats them with dignity and respect, and protects the child from harm and the worker from allegations of harm |  |  |  |

## 2.7 Nutrition and hydration

**The importance of nutrition and hydration for the health and well-being of children**

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| **2.7a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| What is meant by the terms ‘nutrition’ and ‘hydration’ |  |  |  |
| The principles of a balanced diet and good hydration for children |  |  |  |
| Government recommendations for a balanced diet and hydration |  |  |  |
| National and local initiatives that support nutrition and hydration |  |  |  |
| The importance of a balanced diet for optimum health, development and growth of children |  |  |  |
| **Factors** that can affect nutrition and hydration |  |  |  |
| How to encourage children to make healthy food choices |  |  |  |

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| **2.7b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Take account of any specific dietary requirements that children may have |  |  |  |
| Provide support for good hydration and encourages a healthy diet |  |  |  |

## 2.8 Administering medicine

**The roles and responsibilities related to the administration of medication in early years and childcare settings**

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| **2.8a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| Legislation and national guidance related to the administration of medication |  |  |  |
| The roles and responsibilities of those involved in supporting the use of medication |  |  |  |
| The links between misadministration of medication and safeguarding |  |  |  |
| The importance of recording information regarding medication administration |  |  |  |

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| **2.8b Additional AWIFEYCC learning outcomes** **You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Follow your workplace / setting’s policies and procedures in supporting the administration and use of medication |  |  |  |

## Glossary

**‘Factors that may affect the health, well-being and personal, physical, social and emotional development of children’** may include:

* adverse circumstances or trauma before or during birth
* attachment
* autistic spectrum condition
* family circumstances
* harm or abuse
* injury
* learningdisability
* medical conditions (chronic or acute)
* mental health (including self-harming andanorexia)
* physical disability
* physical ill health
* placement disruption
* poverty
* profound orcomplex needs
* sensory needs
* stability
* social deprivation
* substance misuse.

**Curriculum frameworks and curriculum areas** are the standards and guidance that set out the expectations and requirements for learning and development for pre-school and school age children from the foundation phase, including:

* personal and social development, well-being and cultural diversity
* language, literacy and communication skills
* knowledge and understanding of the world
* physical development
* creative development
* mathematical development
* Welsh language development.

**Holistic development** refers to children gaining skills and competence through planned learning and play to develop their physical, social, emotional, intellectual, cognitive and linguistic skills.

**Creative development** includes:

* developing imagination and imaginative play
* responding to experiences, expressing ideas
* exploring media and materials
* traditional creative arts
* music, dance and movement
* messy play.

**Development and assessment frameworks** are nationally recognised frameworks for recording children’s learning and development. These include:

* Early Years Development and Assessment Framework
* Schedule of Growing Skills.

**Environment** refers to the diverse physical locations, contexts, and cultures in which children learn through experimentation and play.

**The playwork principles**: [www.playwales.org.uk/eng/playworkprinciples](http://www.playwales.org.uk/eng/playworkprinciples)

**Different types of play** could include:

* playing creatively
* physical play
* imaginative/pretend play or role play
* environmental play
* playing in a structured environment
* unstructured play
* self-directed play
* adult facilitated play.

**Additional support needs** include:

* physical disability
* learning disability
* autism
* additional health needs
* sensory loss
* emotional and behavioural difficulties
* attention deficit hyperactivity disorder
* dyslexia
* dyspraxia
* complex multiple needs
* attachment disorder.

**Physical care routines** could include:

* toileting
* hand washing
* care of skin
* oral care
* opportunities for rest, quiet time or sleep
* protection from sun/cold
* care of nappy area
* feeding.

**Factors** could include:

* low income and food poverty
* psychological factors, such as parental anxiety, eating disorders
* skills and knowledge
* food provision in settings, such as schools, nurseries, youth settings
* following a special diet
* physical factors, such as positioning, swallowing difficulties, oral health
* health problems, such as constipation, anaemia
* mass media and advertising
* family and peer influences
* ethics, morals and beliefs
* the eating/meal-time environment
* neglect and abuse
* culture and religion
* the child’s individual preferences and habits
* community food initiatives.