

The Marking Criteria

09 October 2015 11:22

Knowledge and Understanding (30%)

Excellent command of highly relevant, extensively-researched material
Extensive, thorough coverage of topic, focused use of detail and examples
Excellent, very sound understanding of complexities and key theoretical models, concepts and arguments
Excellent, consistent engagement with text
Comprehensive understanding of artistic or critical context

Cognitive Skills (30%)

Convincing ability to synthesise a range of views or information and integrate references
Excellent perception, critical insight and interpretation
Very good depth and breadth of critical analysis; sustained, thorough questioning informed by theory
Excellent organisation of ideas; clear, coherent structure and logical, cogent development of argument
Thorough appreciation of learning gained and impact on self; pertinent personal analysis; imaginative, insightful, creative

Communication Skills (20%)

Very clear, fluent, sophisticated and confident expression; highly effective vocabulary and style
Near perfect spelling, punctuation and syntax
All sources acknowledged and meticulously presented
High standard of presentation, evidence of thorough planning, preparation and organisation
Excellent ability to stimulate and enable discussion

Practical or Professional Skills (20%)

Skilled integration of theory and practice
Thorough technical understanding and judgement; excellent level of competence in use of materials and appropriate of working processes and techniques
Excellent design; strong relationship between content, form and technique

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Childhood Illness and Disease

15 October 2015 10:37

There are an array of common childhood illnesses and diseases, many of which are mild and have little or no long term effects on a child's health.

It is vital to have an awareness of such illnesses in order to contain the infection and to maintain good health.

Communicable diseases can be spread from person to person, and so have an impact on the health of children in a day nursery setting.

Other illnesses are caused by a virus which are not treated with antibiotics, and bacterial infections which are.

Infection can be spread 3 ways:

- Inhalation
 - Cough/sneeze into hand or tissue
 - Keeping children with illness out of setting
 - Well ventilated rooms
 - Promote good hygiene
 - Plenty of fresh air
 - Good hand washing

- Ingestion
 - Clean water
 - Personal items
 - Food hygiene - prepped according to food hygiene standards
 - Storage of food carefully - reduce food poisoning
 - Strict procedures in place to dispose of bodily fluids, e.g. vomit
 - High standards of hygiene in regards to equipment, toys, blankets, resources (especially in babies room)

- Inoculation (microorganisms enter via wounds)
 - Children's cuts and grazes are properly washed
 - Cover children's and parent's cuts

Babies and young children have a smaller body mass and can become poorly very quickly. Inability to feed due to weakness, sore mouth, feelings of nausea can weaken the child and lengthen the recovery time

Children can deteriorate very quickly and can require treatment quickly to prevent the illness from worsening

Common danger signs:

- Convulsions
- Pyrexia
- Difficulty drinking or eating
- Breathing difficulties
- Lethargy

Common illnesses include:

- Chickenpox (Varicella)
- Hand Foot & Mouth
- Slapped cheek
- Rotavirus
- Gastroenteritis/Norovirus
- Cold/Flu
- Impetigo
- Tonsillitis
- Earache

The only two not contagious are tonsillitis and earache.

The Role of the Professionals

22 October 2015 13:08

Specifically concerned with children aged 0-3 years.

Multi Professional Working... Work with young children and families has involved professionals from different agencies for many years. There has been a move towards inter agency working in children services for some time.

Sure-Start Children's Centres' core purpose is to improve outcomes for young children and their families, with a particular focus on those in greatest need.

They work to make sure that all children are ready and prepared for school.

They also offer support to parents.

They are regulated by the Childcare Act 2006, which is the legislation that regulates childcare in England.

Children centres are pivotal in cementing the early years and providing services for families. They are rooted into their local community and provide a range of integrated services to meet the needs of the families within their community.

They also have a role to bring together all professionals who work in the area.

This allows the sharing of expertise and an integrated support for the families who need it.

Workforce development - 'Bringing together already established services with the difficulties of ensuring all professionals have shared values and beliefs, and appreciate each other's viewpoints, is far more of a challenge' (Mitchell, 2007).

The nature of the early years workforce, for example, where there are varying professional statuses, differing rates of pay and different experiences, may create barriers to effective and efficient integrated working.

We are not yet at a position where we are recognised by the wider society, as a profession.

Early Years Practitioner...

- Responsible for the holistic development of the child through providing opportunities, as well as responsible for the safeguarding of the child by raising any concerns to correct agencies. Ensuring that high quality provision is available for effective education, as well as stimulating PSED.
- Work with 0-5 years, time limit is until the child reaches 5 years of age
- Community based (mainly)
- They work alongside: parents, health visitors, social workers, speech and language therapist, police, safeguarding officers, council, special education needs coordinator
- Helps the child: Getting school ready, improving PSED, early intervention
Helps parents: Supporting and guiding in relevant areas, getting help and support early

Ultimately, the aim of multi-professional working is to provide a coherent and consistent service, which is to benefit both children and their families.

Progress Check at 2 Years

Statutory aspect of EYFS.

Ofsted wants to see evidence of progress.

Aims to offer parents a short written summary of their child's development in the 3 prime areas: PSED, Physical Development, Communication and Language.

Done when the child is between 24-36 months.

No exact words - should be tailored to the unique child.

It aims to introduce targeted support to identified children.

From Sept 2015, local areas will be expected to integrate the progress check with the health review undertaken by health practitioners when the child is at a similar age.

Combining the two offers the potential to provide better and earlier intervention to support