Title
Describe and reflect on practices to protect and promote the health and holistic wellbeing of children in an ECE service

Level
3

Credits
4

Purpose
People credited with this unit standard are able to: describe health issues and factors that can influence children's health and holistic wellbeing; describe practices to protect and promote the health and holistic wellbeing of children in an ECE service, and reflect on the importance of these in meeting children’s essential needs.

This unit standard has been developed primarily for assessment within programmes leading to the New Zealand Certificate in Early Childhood Education and Care (Level 3) [Ref: 2849].

This unit standard is an introduction to education and care of children in an early childhood service. It is designed for people who intend to work, or are working with, children in an ECE service. People working in the wider education sector may also be interested in this unit standard. This unit standard will prepare people to advance to a higher level of study in ECE.

Classification
Early Childhood Education and Care > Early Childhood: Educational Theory and Practice

Available grade
Achieved

Explanatory notes
1. Candidates for this unit standard should be familiar with the intent of Te Tiriti o Waitangi, which informs guidelines, procedures, and practices in the ECE sector.

2. Definitions
   * *Children* refers to the three 'broad age groups' as defined in *Te Whāriki* for children. These are overlapping age categories and are defined as:
     * infant – birth to 18 months;
     * toddler – one year to three years;
     * young child – two and a half years to school entry age.
   * An *Early Childhood Education (ECE) service* refers to a centre-based service, hospital-based service, or home-based service. The home-based service may be nominated by the child’s parent, be the child’s own home, or the home of the educator.
Essential needs refer to physical, biological, social, emotional, cognitive, spiritual, cultural and linguistic dimensions of basic needs such as nurturing, clothing, nutrition, sleep, shelter, bathing and cleanliness.

Holistic wellbeing refers to a child’s physical, social, spiritual, mental and emotional state, with a focus on the child as a whole and not just the individual parts. Whānau/families may be parents, guardians, and members of the extended family who have an interest in the child.

3 Legislation and regulations include but are not limited to:
Care of Children Act 2004
Education (Early Childhood Services) Regulations 2008
Health and Safety at Work Act 2015
Health (Immunisation) Regulations 1995
Vulnerable Children Act 2014
and subsequent amendments.

4 References
LaMeaux, E.C. (2014). 5 Needs your child must have met at home.
Outcomes and evidence requirements

Outcome 1

Describe health issues and factors that can influence children’s health and holistic wellbeing.

Range  evidence of one age category of children.

Evidence requirements

1.1  The social, economic, environmental and cultural factors that influence the health and holistic wellbeing of a child are described.

1.2  Community health services are described in terms of how they protect the health and holistic wellbeing of children.

Range  evidence of four services.

1.3  Community health issues relevant to children are described in terms of their effect on the child, whānau/families and the wider community.

Range  community health issues may include but are not limited to – glue ear, oral health, childhood illnesses, asthma, diabetes, child obesity, allergies, head lice; evidence of four health issues.

1.4  Communicable diseases prevalent in children are described in terms of their effect on the child, whānau/families, and the wider community.

Range  communicable diseases prevalent in children may include but are not limited to – measles, meningitis, rubella, chicken pox, influenza, common colds, whooping cough, scabies, conjunctivitis; evidence of two.

Outcome 2

Describe practices to protect and promote the health and holistic wellbeing of children in an ECE service, and reflect on the importance of these in meeting children’s essential needs.

Range  evidence of one type of ECE service.

Evidence requirements

2.1  Immunisation issues and immunisation programmes are described in terms of protecting children from disease.

2.2  Children’s essential needs are described and reflected on in terms of their contribution to protecting and promoting children’s holistic wellbeing.

Range  evidence of at least five categories of essential needs.
2.3 The role of whānau/families and the ECE service in providing protection for children and promoting children’s health and holistic wellbeing is described.

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<th>Replacement information</th>
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Consent and Moderation Requirements (CMR) reference 0135
This CMR can be accessed at http://www.nzqa.govt.nz/framework/search/index.do.

Please note
Providers must be granted consent to assess against standards (accredited) by NZQA, before they can report credits from assessment against unit standards or deliver courses of study leading to that assessment.

Industry Training Organisations must be granted consent to assess against standards by NZQA before they can register credits from assessment against unit standards.

Providers and Industry Training Organisations, which have been granted consent and which are assessing against unit standards must engage with the moderation system that applies to those standards.

Requirements for consent to assess and an outline of the moderation system that applies to this standard are outlined in the Consent and Moderation Requirements (CMR). The CMR also includes useful information about special requirements for organisations wishing to develop education and training programmes, such as minimum qualifications for tutors and assessors, and special resource requirements.

Comments on this unit standard
Please contact NZQA National Qualifications Services nqs@nzqa.govt.nz if you wish to suggest changes to the content of this unit standard.