

The Mayor of London's Award Programme

Healthy Early Years London

Guidance pack for early years settings







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About this guidance pack

This Healthy Early Years London Guidance pack sets out:

- The overall aims and principles of the programmes;
- The process for achieving and maintaining the awards;
- Detailed guidance to support completion of the HEYL Bronze, Silver and Gold awards

Separate practice guidance, 'Healthy Schools London and Healthy Early Years London: Transitional arrangements 2025' sets out the process for settings who had already started on the awards before the updated HSL and HEYL became available in September 2025.

Introduction

The Mayor of London is committed to making London the greatest place in the world to grow up in; where every young person has the support and opportunities they need to thrive. The Mayor also believes, that by taking bold action, we can make London the healthiest city to live in. From protecting children's lungs by cleaning up London's air, to reducing exposure to unhealthy advertising on the transport network, the Mayor will continue to take action to improve the health and wellbeing of young people and their families.

We know that every stage of a young person's development – from birth through early childhood, school years, adolescence, and their first steps into adulthood shapes their future health and life chances. However, for far too many children in our city, the circumstances in which they live, learn, and play mean that they face additional barriers to living healthy lives.

Healthy Schools London (HSL) and Healthy Early Years London (HEYL) play a key role in helping every child to have the best start in life, regardless of their background. They recognise the vital role schools and early years settings are playing across the capital in improving healthy eating, promoting physical activity, and supporting mental health and emotional wellbeing. Since the programmes began, over 4,500 schools, nurseries and childminders have joined with us in our mission to tackle the unfair and avoidable health inequalities that are holding families back and preventing all our young people from reaching their full potential.

Building on this success, and following engagement with London boroughs, the programmes were updated in September 2025 to reflect the most current challenges facing children and young people and to improve our offer to settings and boroughs. We hope that, as we move forward together, even more schools, early years settings, and childminders will join us in creating environments that help secure the health and happiness of the next generation of Londoners.

Joanne McCartney,

Deputy Mayor for Children and Families

Joanne M. Cartney

The Awards programme

There are awards at three different levels:

Bronze Award	Silver Award	Gold Award
BRONZE 20 AWARD CONDON	SILVER AWARD	GOLD AWARD OF TONDON
Acknowledges and celebrates that the setting has a high-quality embedded approach to health and wellbeing for all children.	Provides evidence that the setting has identified a health and wellbeing priority and devised a new approach, project, practice or intervention to target the priority.	Recognises that the setting has evaluated the impact and sustained the outcomes of this new approach, project, practice or intervention.
Review of the setting's policies and practices that support health and wellbeing outcomes	 Undertake a needs analysis Use the needs analysis to identify and define group/s Develop planned measurable outcomes and an action plan Show how you will monitor and evaluate the project to measure success and demonstrate improvements 	 Record results and outcomes Reflect on approach taken Provide analysis of results and share impact Explain how activity is being sustained

The Awards pathway

Bronze Award

Achieving the Bronze Award recognises and celebrates that a setting has established a high-quality, whole-setting approach to health and wellbeing that is embedded for all children. The Bronze Award forms the foundation of the Healthy Early Years London (HEYL) programme, covering the key themes of health and wellbeing and underpinning any future Silver or Gold Award achievements.

To ensure this foundation remains relevant and reflective of current practice, the Bronze Award is renewed every three years.

Silver and Gold Awards

Settings build on this foundation by progressing to the Silver and Gold Awards, which demonstrate how they have developed their approach further. These awards celebrate settings that have built on the good practice evidenced in their Bronze Award and taken clear, purposeful action to improve outcomes for their children.

After achieving both Silver and Gold Awards for a particular priority, a setting may begin the process again - either by selecting a new health and wellbeing priority, or by continuing with the same theme but focusing on a different aspect.

While settings achieve and renew one Bronze Award, they can go on to achieve multiple Silver and Gold Awards, marking their continued commitment to supporting and improving children's health and wellbeing.



Progression through the Awards

Registration 1. Register for award on GLA website - Complete simple registration process on website. 2. Contact Borough Lead - Discuss your next steps and the support available with your Borough Lead (BL). **Bronze Award** 1. Contact Borough Lead - Discuss your Bronze Award application with your BL. 2. Complete Bronze Award tool - Record your current practice using the Bronze Award tool, ensure all criteria are met and provide evidence to support all criteria. 3. Submit Bronze Award tool - Your award tool will be considered for approval by your Borough Lead and feedback will be given where relevant. Your award will be validated by the Healthy Early Years London team. **Bronze** 1. Notification: renewal: - You will receive notifications via email advising you to contact your **Every three** Borough Lead before beginning renewal. years 2. Review Bronze Award tool and record updates - Review your original Bronze Award tool in full and update any changes. 3. Reflect - Reflect on your progress, priorities and next steps for health and wellbeing. 4. Submit updated Bronze Award tool and any accompanying - Your renewed award tool will be considered for approval by your Borough Lead and feedback will be given where relevant. Your award will be validated by the Healthy Early Years London team.

1. Bronze Award in date

Silver Award

	- Your Bronze Award has been either achieved or renewed within 3 years of your Silver application.
	2. Contact Borough Lead- Discuss your Silver application with your BL.
	3. Complete Silver Award tool
	- Undertake a needs analysis, identify a health and wellbeing priority,
	develop an action plan to implement a new approach to address the priority.
	4. Submit Silver Award tool
	- Your tool will be considered for approval by your Borough Lead and feedback will be given where relevant. Your award will be validated by
	the Healthy Early Years London team.
Gold Award	 1. Bronze and Silver Award in date Your Bronze Award has been either achieved or renewed within 3 years of your Gold application.
	- We encourage you to apply for your Gold within 3 years of achieving your Silver Award.
	2. Contact Borough Lead
	- Discuss your Gold application with your BL.
	3. Complete Gold Award tool
	- Evaluate the outcomes and impact of the new practice, activity or
	intervention implemented through your Silver action plan, describe sustainability plans.
	4. Submit Gold Award tool
	- Your tool will be considered for approval by your Borough Lead and
	feedback will be given where relevant. Your award will be validated by the Healthy Early Years London team.
Further	Once a Gold Award is achieved, settings can:
progression	a) Apply for new Silver/Gold Awards in a different health and
	wellbeing priority.
	b) Revisit the same priority but focus on a new aspect or
	approach.

Certificates and logos

Once your award has been approved by your Borough Lead and validated by the HEYL project team, you will receive a dated certificate that can be displayed to celebrate your achievement with staff, children, parents, and the wider community.

You will also be provided with a digital award logo, which can be used on your setting's website, newsletters, email signatures, or other communications to highlight your commitment to health and wellbeing.

The role of Borough Leads

Borough Leads (BL) play a key role in the HEYL awards programme. Borough Leads are responsible for leading the HEYL programme locally across each borough. The way BLs are organised is dependent on how the role is managed locally and BLs work differently in different boroughs.

Borough Leads support settings as they complete their applications and progress through the awards process. They review award tools, provide feedback where needed, and recommend them for validation. Final approval of awards is carried out by the Greater London Authority (GLA) team.

There are varying levels of support available across boroughs. Where Borough Lead support may be limited or unavailable, settings can access support with the awards programme through the HEYL project team.

Further support

For support:

- Contact your HEYL Borough Lead, or
- Reach out to the HEYL project team: HEYL@ncb.org.uk

You can also find more information, support and guidance on the **HEYL website**



Introduction

The Bronze Award tool is designed to help your setting reflect on, celebrate, and strengthen your current approach to health and wellbeing. It supports you to review what's already working well and where you could make changes to your practice to ensure you meet all the criteria.



This guidance is designed to support you to work your way through the Bronze Award tool.

The Bronze Award tool is divided into four sections and within each section there are a series of criteria that you need to demonstrate that your setting meets.

Each criterion is listed below with

- A short summary of what the criterion focuses on.
- A set of questions/prompts to help you reflect on your practice and think about what to include in your response.

For criterion requiring a written response, your responses should provide a clear description of your setting's practice, describing what you do in your setting, not just what you aim to do. This should explain how you meet the criterion, covering all aspects of the criterion.



Where requested (indicated by an arrow), your response <u>should also</u> <u>include a specific practical real-life example</u>, which clearly demonstrates the criterion in action. Photos with brief descriptions may also be used for the examples.

Where required, there is **further information on how to complete your response**, also indicated by an arrow.

You should use concise and specific language - bullet points are welcome. There is a suggested word count to guide the length of your responses.

When describing how you meet the criteria, you can draw on a wide range of evidence, such as:

Documentation: Use setting policies, induction materials, and training records to show how your approach to health and wellbeing is planned, consistent, and shared across your team.

Daily routines: Explain how your everyday routines help promote children's wellbeing, independence and learning.

Learning environment (indoor and outdoor): Show how your learning spaces support children's health, emotional wellbeing, and development through thoughtful organisation, access, and design.

Practitioner-child relationships: Highlight the quality of interactions between adults and children, showing how practitioners build trust, promote language and support social-emotional development.

Activities: Describe the planned and spontaneous activities, outings or visitors you provide to extend children's health, learning, and wellbeing.

Inclusive practice: Show how you adapt your environment, routines, strategies and activities to include all children, especially those with special educational needs and disabilities (SEND), English as an additional language (EAL) or additional needs.

Strategies, interventions and programmes: Mention any targeted approaches used to support individuals or groups of children in specific areas of development.

Information and support for parents/carers: Explain how you engage families and keep them informed and involved in supporting their child's health and development.

Links with the local community: Show how you use community resources and services to enrich your setting's offer and support families more widely.

Online resources

On the <u>Healthy Early Years London website</u>, you will find a wide range of useful links to help support your setting's award journey. These include toolkits and templates, example documents, key information and details of programmes and initiatives you might want to get involved in. While not exhaustive, the collection of resources signpost settings to high-quality, practical support aligned with the different aspects of health and wellbeing.

Section 1: Leadership, ethos, culture, and environment

This section focuses on the overall approach in the setting and your commitment to supporting physical and mental health and wellbeing for children, parents and staff.

It helps you reflect on your vision and values, your partnership with parents/carers, how you promote a culture of listening, and the ways in which staff are supported in your setting.

The suggested word count for each criterion in this section is **100-200 words**.

Vision and ethos

1.1 The vision and ethos of the setting supports and promotes the health and wellbeing of all children, parents/carers and staff.

This criterion focuses on how your setting's vision and core values prioritise the health and wellbeing of children, parents/carers and staff.

In your response, consider the following questions:

Does your setting's vision and core values show a clear commitment to health and wellbeing?

Reflect on the language you use and whether your vision and core values make explicit reference to health and wellbeing.

How do you communicate your commitment to health and wellbeing?

Think about how your commitment to health and wellbeing is communicated through your policies, website, induction information for staff, welcome materials, displays

How is your setting's ethos demonstrated through the ways you support and promote the health and wellbeing of children, parents/carers and staff?

Consider how your everyday practice, such as daily routines, relationships, interactions, environment, supports and nurtures health and wellbeing.

1.2 All practitioners celebrate diversity and promote equality and inclusive practice in all aspects of work with children and families.

This criterion focuses on ensuring that every practitioner in your setting consistently demonstrates inclusive, respectful, and equitable practice in all aspects of their work, including planning, daily interactions and communication with parents.

In your response, consider the following questions:

How do you actively celebrate and reflect the diverse backgrounds, cultures, and identities of the children and families in your setting and local and wider community?

Think about how you acknowledge and incorporate different backgrounds, cultures, and identities into your daily practice for example, planning, resources, displays, routines, celebrations.

How do you ensure your practice is inclusive and accessible to all children, including those with SEND, EAL, or from different family structures or cultural backgrounds?

Reflect on how you plan for access, adapt activities, remove barriers, and celebrate difference as part of your inclusive approach.

1.3 Practitioners support children to develop an understanding, appreciation and respect for different people, families and communities.

This criterion focuses on how practitioners help children begin to make sense of the world around them and understand that people are all different and all equally valued.

In your response, consider the following questions:

How do you help children notice and talk about similarities and differences in a way that fosters curiosity, kindness and respect?

Think about how you use books, conversations, observations, children's experiences to open up inclusive discussions.

How do you create an environment where all families feel welcome, respected, and actively involved in the life of the setting?

Consider how you build relationships, communicate inclusively, invite community voices, and provide opportunities for families to share their knowledge, language, and culture to help children develop respect and understanding for different ways of life.

Partnership with parents and carers

1.4 There is effective two-way communication between practitioners and parents/carers, including sharing information about their child's learning and development.

This criterion focuses on how your setting builds strong partnerships with parents and carers through open, ongoing and meaningful two-way communication, particularly around each child's learning, development and wellbeing.

In your response, consider the following questions:

What methods and approaches do you use to communicate with parents and carers on a daily basis?

Consider informal conversations at drop-off/pick-up; use of key person relationships to provide consistency and trust; home—setting communication books/diaries; digital platforms such as secure apps (for example, Famly, Tapestry, ParentZone) for messaging, photos, updates, and newsletters; information displayed in entrance areas to share daily activities, news, or reminders.

How do you share meaningful information with parents and carers about their child's learning, development, and wellbeing?

Reflect on the tools and approaches you use and how often you share updates. Think about how you build trusting relationships with parents and carers and how you enable them to feel involved and valued in their child's learning journey.

How do you adapt your approach to meet the communication and access needs of families from different backgrounds or with additional challenges (for

example, EAL, low literacy, or neurodiverse parents)?

Consider how you use translation, simplified language, visual aids, and one-to-one support where needed.

1.5 Practitioners and parents/carers work in partnership to plan support to meet the additional needs of children with special educational needs and disabilities (SEND).

This criterion focuses on how early years practitioners work collaboratively with parents and carers to understand, plan for, and meet the unique needs of children with SEND.



Include in your response <u>a specific practical real-life example</u> of how you have supported a child in your setting with SEND.

In your response, consider the following questions:

How do you involve parents and carers in identifying and planning support for children with SEND?

Think about how you gather their insights, share observations, and create joint strategies that reflect the child's strengths and needs and ensure the support is tailored to their individual needs.

How do you regularly review progress, celebrate successes, and adapt support plans in partnership with parents and carers?

Reflect on approaches you use such as home–setting communication books, review meetings, or informal check-ins to ensure support remains effective and responsive to the child's needs.

Listening culture and opportunity to influence change

1.6 There are opportunities for staff to give feedback, which is responded to, and acted upon as necessary.

This criterion is about fostering a culture where staff feel listened to, respected, and involved in influencing change to practice within the setting.

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List the ways staff can give feedback



and

describe <u>a specific example</u> of when a member of staff or staff collectively gave their views

In your response, consider the following questions:

What regular opportunities are there for staff to share their ideas, feedback, and concerns?

Consider the variety of ways staff can give feedback such as team meetings, supervision sessions, suggestion boxes, or informal check-ins.

How do you show that staff feedback is listened to, valued, and followed up with meaningful action?

Describe a specific example of when a member of staff or staff collectively gave their views - include how the feedback was captured, how it was responded to, and the action that followed.

1.7 There are opportunities for parents/carers to give feedback, which is responded to, and acted upon as necessary.

This criterion focuses on how you encourage, value, and respond to parent and carer feedback as part of a strong home—setting partnership.

List the ways parents/carers can give feedback



and

describe <u>a specific example</u> of when parents/carers gave their views

In your response, consider the following questions:

How do you offer parents and carers regular and accessible opportunities to share feedback about their experiences with the setting?

Consider the variety of ways parents and carers can give feedback for example, surveys, informal conversations, feedback forms, digital platforms, or parent meetings. Reflect on the formats you use and whether feedback options are inclusive and flexible.

How do you show that parents and carers feedback is listened to, valued, and followed up with meaningful action?

Describe a specific example of when parents/carers gave their views - include how the feedback was captured, how it was responded to, and the action that followed.

1.8 There are opportunities for children's opinions, views and preference to influences changes to practice and the environment, including pre-verbal and other forms of communication.

This criterion focuses on how children's voices are heard, valued, and used to shape the learning environment, routines, and approaches within the setting. It includes ensuring that all children can give their views, including pre-verbal and other forms of communication.



List the ways you enable children to express their opinions, views, and preferences

and

describe <u>a specific example</u> of when a child/ren's voice influenced a specific change within the setting

In your response, consider the following questions:

How do you create regular opportunities for children to express their views, choices, and interests through play, interactions, and other forms of communication?

Think about how you tune into children's verbal and non-verbal cues, and how you follow their lead in day-to-day practice. Reflect on how you include all children including those with SEND, EAL, or communication differences for example, through

using visual aids, choice boards, Makaton, and small group conversations to ensure every child is heard.

In what ways do children's ideas, preferences or behaviours influence how you plan, adapt routines, or make changes to the learning environment?

Describe a specific example of when a child/ren's voice influenced a specific change within the setting – include how their voice was captured, how it was responded to and the action that followed.

Staff professional development and wellbeing

1.9 Staff have regular, supportive supervision and reflective practice is encouraged.

This criterion focuses on how settings provide meaningful, structured opportunities for staff to reflect on their work, develop professionally, and feel supported in their roles.

In your response, consider the following questions:

How often do staff receive formal supervision, and how is it used to support both professional development and wellbeing?

Consider whether supervision is regular, structured, and focused on both reflective discussion and practical planning.

How is reflective practice encouraged beyond formal supervision for example, through team discussions, peer support, or shared planning?

Reflect on how your setting values learning from experience and provides time and space for staff to think critically about their work.

How is information from supervision and reflection used to shape staff training, improve everyday practice, and support children's learning and wellbeing?

Consider how insights gathered through supervision and reflection is used to inform decisions regarding training, everyday practice and how children are supported in the setting.

1.10 Staff are supported to maintain their own physical and mental health and wellbeing.

This criterion focuses on how your setting prioritises staff wellbeing as an essential part of creating a healthy, sustainable working environment. Supporting the physical and mental health of staff not only benefits individual team members but also helps create a positive culture and improves outcomes for children and families.



Include in your response <u>a specific practical real-life</u> example of how staff are supported to maintain their physical and/or mental health and wellbeing.

In your response, consider the following questions:

What strategies or support systems are in place to support staff mental health and wellbeing?

Think about regular wellbeing check-ins, access to mental health resources, flexibility in work routines, wellbeing champions, wellbeing activities or initiatives.

How are staff supported to look after their physical health?

Reflect on break times, rest spaces, encouragement of healthy habits, and reasonable expectations around lifting, movement, and daily routines.

1.11 Staff training opportunities include aspects of health and wellbeing for young children.

This criterion focuses on how early years settings ensure that staff are confident and well-equipped to support the health and wellbeing of young children as part of their professional development.



Provide at least <u>two specific examples</u> of relevant training undertaken by a member(s) of staff within the past two years.

In your response, consider the following question:

What opportunities do staff have to access training focused on supporting young children's physical and mental health and wellbeing?

Consider whether training covers areas such as brain development, nutrition, physical activity, oral health, self-regulation, emotional wellbeing and mental health, trauma-informed practice, first aid, internet safety, food safety and hygiene. Think about how training needs are identified and how opportunities are shared across the team.

Section 2: Policies and Procedures

This section focuses on ensuring that your setting has clear, up-to-date policies that reflect current legislation, and best practice to support health and wellbeing. These policies should guide day-to-day practice, be known and used by staff, and shared with families in an accessible way.

2.1 The setting has all statutory policies/documents in place, including:

- Safeguarding
- Administering medicine to children
- Complaints procedure
- Attendance

To meet this criterion, your setting should ensure that all required statutory policies and documents are in place and reviewed within the required time frames.



Tick the box to confirm that these policies are in place, up to date, and meet statutory requirements.

2.2 The setting has the listed policies in place to support health and wellbeing:

- Food and drink, including breastfeeding
- Food safety and hygiene
- Physical activity, including risky play and outside learning
- Emotional health and mental wellbeing
- Substance policy, covering smoke free, including vaping, drugs and alcohol
- Immunisation and infection control

To meet this criterion, your setting should have in place up-to-date policies, documents, or procedures that cover the following areas:

Food and drink, including breastfeeding - An effective food and drink policy should outline how your setting supports healthy eating and drinking, promotes inclusive and culturally sensitive practices, and ensures safe and appropriate feeding for all children, including those who are breastfed or starting solid foods.

Food safety and hygiene - An effective food safety and hygiene policy ensures that all food handling, preparation, and storage practices in the setting meet legal requirements and protect the health and wellbeing of children and staff. It should demonstrate the setting's commitment to high standards of cleanliness, food safety, and staff training.

Physical activity, including risky play and outside learning - A physical activity policy should reflect your setting's commitment to promoting movement, exploration and healthy development through daily physical activity, outdoor play, and safe opportunities for appropriate risk-taking. It should outline how staff plan for and support active learning, ensure safety, and meet children's physical needs in line with national guidelines.

Emotional health and mental wellbeing - An effective emotional health and wellbeing policy should outline how the setting promotes a culture of emotional safety, inclusion, and care for children, families, and staff. It should reflect a commitment to nurturing positive mental health, early intervention, and strong relationships across the setting community.

Substance policy, covering smoke free, including vaping, drugs and alcohol - An effective substance use policy should clearly outline expectations for a smoke-free and substance-free environment, safeguarding the health, wellbeing and safety of children, families, staff, and visitors. It should reflect current legislation and promote a positive example for children.

Immunisation and infection control - An effective immunisation and infection control policy helps protect the health of children, staff and families by promoting best practice in hygiene, illness management, and vaccination. It should reflect statutory guidance and support the setting's commitment to minimising the spread of preventable diseases.



Tick the box to confirm the policy/procedure is in place

List the date of the last review

Provide a link to where the policy is published online (for example, on your setting's website). If the policy is not online, send it to your Borough Lead.

One policy may cover one or more of the listed policies. If this is the case, please indicate.

2.3 Please describe how the policies are made available to parents.

This criterion focuses on how your setting ensures that policies are accessible to parents and carers. Suggested word count 100-200 words.

In your response, consider the following questions:

How do you ensure that key policies are clearly communicated and made easily accessible to parents and carers?

Consider how policies are shared (for example, welcome packs, noticeboards, online), how all parents are supported to engage with them, and how you respond to questions or feedback.

How do you keep families informed when policies are updated or reviewed? Consider how you communicate changes clearly and invite feedback where appropriate.

Section 3: Areas of learning and development

This section focuses on how practitioners support children's learning and development across the three prime areas of the **EYFS**, which are crucial to promoting children's long-term wellbeing, resilience, and readiness to learn.

It recognises the vital role early years practitioners play not only in delivering high-quality learning experiences within the setting but also in building strong partnerships with parents and carers to extend and reinforce children's development at home through the information and support offered to parents and carers.

Word count for each criterion in this section: 200-350 words.

Personal, social and emotional development

Social & emotional health and wellbeing

3.1 Practitioners understand how to support young children's development of selfregulation and provide opportunities for children to identify, understand, explore and manage their emotions and behaviour.

This criterion focuses on how practitioners nurture children's ability to manage their emotions, behaviour and responses over time, through warm relationships, consistent routines, and age-appropriate strategies and activities.



Include in your response <u>a specific practical real-life</u> example of an activity or approach you have used to support a child/ren's self-regulation

In your response, consider the following questions:

What daily routines and strategies do you use to support children in developing their ability to self-regulate their emotions and behaviour?

Consider how supportive relationships, consistency, transitions, modelling, and coregulation feature in your practice.

How do you use your learning environment to support emotional regulation and wellbeing for all children, including those with SEND?

Reflect on the use of cosy spaces, visual prompts (for example, now/next boards), sensory tools, and flexible access to outdoor areas.

What activities do you use to help children identify, explore, and understand their feelings and behaviours?

Think about storytelling, emotion cards, role-play, small group work, or sensory-based activities.

3.2 The key person:

- ensures their key child(ren) has their social and emotional care needs met
- supports their key child(ren) to develop strong and supportive relationships with adults and to develop positive relationships with other children
- supports their key child(ren) to develop a positive sense of self and confidence in their own abilities
- obtains, shares and uses information to support their key child(ren)'s transitions
 to and within the provider

This criterion focuses on the vital role of the key person in promoting children's emotional wellbeing, secure attachments, and self-confidence. It recognises that consistent, responsive relationships are essential for young children's wellbeing and development.



Explain how you meet this criterion by describing your key person approach, ensuring you cover each of the bullet points.

<u>and</u>

include in your response <u>a specific practical real-life</u> example to demonstrate one of these aspects in action.

In your response, consider the following questions:

How do practitioners build warm, trusting relationships with their key child(ren) to ensure their social and emotional care needs are consistently met?

Consider how you respond to individual cues, provide comfort and security, and support emotional wellbeing throughout the day.

How do practitioners help their key child(ren) develop strong and supportive relationships with other adults in the setting and to form positive relationships with their peers?

Think about how you build confidence in new situations, support transitions, and encourage safe attachments beyond yourself. Reflect on how you model empathy, strategies you use to encourage friendships, shared play, turn-taking, cooperation with peers and how to respond to social challenges or conflicts.

How do practitioners nurture their key child(ren)'s confidence and help them develop a positive sense of self and belief in their abilities?

Consider how you encourage children to explore, try new things, and express their preferences and consider the ways you help children celebrate achievements, build independence, and feel proud of who they are.

How do practitioners gather, share, and use information to support smooth and sensitive transitions for their key child(ren) as they move into, within or from the setting?

Reflect on your settling-in and transition procedures, how you work in partnership with parents, carers, and colleagues to understand each child's needs, preferences, and routines, and how you use this information to help them feel supported emotionally and practically.

3.3 Information, activities and support are provided for parents/carers to support children's social and emotional development.

This criterion highlights the importance of working in partnership with parents and carers to help them support their child's social and emotional development at home and in everyday life. It highlights the role of early years practitioners in recognising when families may benefit from additional support and confidently guiding them towards relevant services.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting social and emotional development.

In your response, consider the following questions:

What evidence-based information, resources or practical ideas do you share with parents and carers to help them understand and support their child's social and emotional development?

Consider newsletters, leaflets, videos, signposting to trusted websites or local support, parent workshops, stay and play sessions. Think about activities or strategies you suggest for families to try at home, such as emotion games, storybooks, mindfulness activities, or simple daily routines that encourage sharing and turn-taking. Resources you may send home (for example, books, calming jars, visuals) or make available through lending libraries.

How do you provide opportunities for parents and carers to learn more about supporting their child's social and emotional development or to ask for support?

Consider whether you offer things like informal coffee mornings, parenting workshops, signposting to trusted services, or one-to-one conversations.

How do you identify when additional support may be needed, and how do you sensitively approach conversations with families about accessing help?

Reflect on how you balance professional judgement with empathy, cultural

sensitivity, and the family's voice. Consider whether you provide clear information, follow up appropriately, and offer ongoing encouragement.

Independence in managing self and hygiene

3.4 Children learn about self-care and hygiene and are taught to develop good practices and manage their personal needs independently.

This criterion focuses on how settings actively support children to develop independence in managing their personal care and hygiene routines. Building these skills lays the foundation for lifelong healthy habits.



Include in your response <u>a specific practical real-life example</u> of an activity or approach you have used to support child/ren's self-care, hygiene and independence.

In your response, consider the following questions:

inviting to use, and encourage autonomy.

How do you support children to understand and practise self-care and good hygiene routines, such as handwashing, nose-wiping, and toileting?

Consider how these are consistently modelled, explained, and reinforced through daily routines, and any songs or specific activities you use to help children. Reflect on whether your environment enables and encourages children to practice their self-care skills independently, for example, sinks, toilets, pegs are accessible, child-sized,

How do you adapt support for children with differing needs or developmental stages, including those with SEND or EAL, to help them develop self-care skills?

Think about how visual prompts, adult guidance, and sensory adaptations are used to enable success for every child.

3.5 Information, activities and support are provided for parents/carers to support children's independence in self-care and hygiene.

This criterion focuses on how early years settings work in partnership with families to promote children's confidence and independence in managing personal care routines and highlights the important role that practitioners play in identifying when children and families may need additional help and guiding them towards the right support.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting independence in self-care and hygiene

In your response, consider the following questions:

What evidence-based information, resources or practical ideas do you share with parents/carers to help them support their child's independence in toileting, handwashing, dressing, and other daily routines?

Think about leaflets, links to trusted websites, workshops, home learning ideas, or informal conversations.

How do you ensure that the support you offer is practical, age-appropriate, and aligned with the child's stage of development?

Consider how you tailor your advice or resources to meet the needs of individual children and families.

How do you build open, respectful relationships with parents and carers to discuss their child's developing independence and self-care skills (for example, dressing, toileting, handwashing), and how confident are you in guiding them to further support if needed?

Reflect on how you share observations, invite family perspectives, and sensitively signpost to relevant services or professionals when there are concerns around toileting, developmental delays, or related needs.

3.6 Practitioners provide information and support parents/carers with routine medical and health practices.

This criterion recognises the important role that early years practitioners play in helping families access and understand routine medical and health guidance that supports children's development and wellbeing.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around routine medical and health practices.

In your response, consider the following questions:

How do you promote the importance of childhood immunisations and encourage families to access them in a way that is inclusive, non-judgemental, and culturally sensitive?

Consider how you create opportunities for open conversations, use trusted resources, and respond respectfully to questions or concerns. Reflect on how you support families who may be hesitant or unsure about vaccines, whether staff feel confident in offering reassurance, signposting to credible sources, and addressing misinformation calmly.

How do you share accessible and up-to-date information with families about other key health services, such as dental care, vision and hearing checks, weight and growth monitoring, and the two-year health review?

Think about how and when you provide this information for example, through newsletters, leaflets, posters, parent chats, or digital platforms.

Physical Development

Healthy eating, breastfeeding and starting solid food

3.7 Any food/drink served meets the Government guidance for <u>Early Years</u>
<u>Foundation Stage nutrition</u> (2025)

This criterion asks you to confirm any food or drink served to children aligns with the Government guidance for **Early Years Foundation Stage nutrition** (2025)



Tick to confirm setting menus meet the guidelines

Attach a copy of your menu

Add date when menus were reviewed against the guidelines

- 3.8 The setting's approach to supporting healthy eating includes:
- Meals and snacks are scheduled at regular times
- Fresh drinking water is always available and accessible to children
- Staff are aware of appropriate portion sizes for children and encourage children to stop eating when they are full
- Whilst eating, children are within sight and hearing of a member of staff, who sits facing them to be alert to choking or allergic reactions

This criterion focuses on how your setting creates a safe, supportive and developmentally appropriate approach to healthy eating and hydration for young children.

In your response, consider the following questions:

How do you promote a healthy, balanced diet throughout the day including the timing of meals and snacks, and ensuring drinking water is always available?

Reflect on how your approach supports healthy habits and promote positive

mealtime experiences. Think about whether drinking routines are child-led, accessible and how children are encouraged to stay hydrated throughout the day.

How do staff use their knowledge of appropriate portion sizes and children's hunger cues to encourage healthy eating in a positive way?

Think about how you encourage children to listen to their bodies, avoid pressure, and support them to stop eating when they're full.

How do you ensure that staff consistently supervise children whilst eating?

Consider how your staff are trained, how mealtime supervision is organised, and how safety is prioritised without disrupting the social experience of eating.

3.9 There is a process for obtaining information, monitoring and managing dietary requirements, preferences, food allergies and intolerances, including when introducing solid foods.

This criterion ensures that settings take a consistent and proactive approach to gathering and responding to children's individual dietary needs. It includes health-related requirements (such as allergies and intolerances), as well as cultural, ethical, or religious preferences and family preferences.

In your response, consider the following questions:

How do you gather detailed and up-to-date information from families about each child's dietary requirements?

Consider the forms or conversations you use at induction, and how you ensure this information is accurate and clearly recorded. Reflect on how you make sure all staff are aware of individual needs and how you prevent mistakes.

What systems are in place to regularly review and update children's dietary information, especially when introducing solid foods or managing changes over time?

Think about how you communicate with families as children's needs evolve and how updates are recorded and actioned.

How do you monitor that dietary requirements are being consistently followed, and that staff are confident in managing allergies or medical conditions (for example, anaphylaxis)?

Consider training, supervision, allergy management plans, and visual reminders to ensure safety and inclusion.

3.10 The setting promotes a supportive breastfeeding environment, which includes providing a comfortable, private space for breastfeeding and refrigerated storage for expressed breast milk.

This criterion recognises the role settings play in supporting infant feeding choices, particularly breastfeeding. A welcoming, inclusive environment can make a significant difference for breastfeeding families by reducing barriers and promoting health and attachment.

In your response, consider the following questions:

How do you communicate to families that breastfeeding is welcomed, supported and there is a comfortable private space for breastfeeding in your setting?

Consider how this is reflected in your policies, induction conversations, signage, or parent communications. Reflect on accessibility, comfort, and how the space is introduced to families.

How do you ensure that clear procedures are in place and consistently followed to guarantee that expressed breast milk is safely stored, labelled, and given to the correct child?

Reflect on the systems used to track, verify, and administer milk, and how errors are prevented.

3.11 Staff act as positive role models to support children to develop an appreciation of healthy eating.

This criterion focuses on how staff demonstrate and promote healthy eating behaviours in their daily interactions with children, helping them to build positive attitudes toward food and mealtimes.

In your response, consider the following questions:

How do staff consistently model healthy eating habits and attitudes during mealtimes and food-related activities?

Consider how staff talk about food, eat alongside children, and demonstrate enjoyment of a balanced, varied diet.

How do staff to encourage children to explore, enjoy, and feel confident around food?

Consider how you use language and interactions to describe different foods, promote curiosity, and support children in listening to their own hunger and fullness cues.

3.12 There are regular opportunities for children to prepare and eat healthy food together, including different cultural foods and practices.

This criterion focuses on how your setting provides regular, meaningful opportunities for children to prepare and enjoy healthy food as part of daily learning and routines. It also highlights the importance of including food experiences that reflect different cultures and traditions.

In your response, consider the following questions:

What opportunities do children have to prepare, taste, and enjoy healthy food together through daily routines and planned activities?

Think about how regularly these experiences take place and how they support social development, independence, and life skills.

How do you ensure that food-based experiences reflect the cultural backgrounds and traditions of children and families in your setting?

Reflect on how you involve families, introduce new foods respectfully, and celebrate food as part of cultural identity.

How do you make these food-related opportunities inclusive and accessible for all children, including those with dietary needs, allergies, or sensory sensitivities? Consider how you adapt resources, involve every child, and maintain safety while promoting participation.

3.13 Children experience simple food growing activities and learn about where food comes from.

This criterion recognises the importance of helping children connect with nature and develop an early understanding of where food comes from. Food growing experiences encourage curiosity, promote healthy eating habits, and offer valuable learning opportunities across all areas of development.

In your response, consider the following questions:

How do you plan and provide opportunities for children to take part in simple food growing activities?

Consider how you can build hands-on experiences your curriculum and environment using the space available. This could be simple growing activities indoors for example, growing seeds on a windowsill; a growing area created in the outside environment; food such as tomatoes grown in pots outside; or you may have access to an area in the local community where children can be involved in growing food.

How do you help children understand where food comes from and make connections between growing, preparing, and eating healthy food?

Think about how you use stories, discussions, displays, or cooking to link growing with real-life eating habits.

3.14 Information, activities and support are provided for parents to support children's healthy eating.

This criterion recognises the important role early years settings play in working with families to promote healthy eating habits both in the setting and at home. Providing accessible information and simple, practical ideas can help parents make informed choices and create consistency in messages around food and nutrition.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting healthy eating.

In your response, consider the following questions:

What types of evidence-based information and practical ideas do you share with parents and carers to help them promote healthy eating at home? Consider how often you provide tips, recipes, or guidance through newsletters, chats, workshops, or digital platforms. Think about how you promote and share information on the Healthy Start scheme. Reflect on how you involve parents in food-related activities, such as cooking projects, tasting sessions, or growing food.

How do you support families facing financial difficulties around healthy eating?

Think about how you provide practical, budget-friendly ideas for healthy eating, offer support in a respectful and inclusive way, and signpost to local food banks, community programmes, or other relevant services.

How do you work in partnership with families to offer practical advice or reassurance about their child's eating habits, challenges, or routines at home? Consider how you build trust and encourage open dialogue during drop-offs, meetings, or informal chats. Reflect on how your approach is non-judgemental and tailored to the needs of each child and family.

Oral health

3.15 Children learn about oral health: how to keep teeth clean and the importance of going to the dentist.

This criterion recognises the role early years settings play in laying the foundations for good oral health. Supporting children to develop an early understanding of how to care for their teeth helps promote lifelong healthy habits and prevent tooth decay.



Include in your response <u>a specific practical, real-life example</u> of an activity or approach you have used to support children learn about oral health

In your response, consider the following questions:

What activities or routines do you use to support children in understanding how to look after their teeth?

Consider the use of songs, role-play, stories, puppets, visual aids, games or through daily routines. Think about how you help children understand healthy food and drink choices and how they learn about the importance of brushing their teeth. Reflect on whether you offer supervised toothbrushing.

How do you help children feel confident and positive about visiting the dentist?

Reflect on how you prepare children for dental visits through books, pretend play, or

discussions, or whether you have links with local dental professionals (for example, visits from a dentist or dental nurse) to help children learn about oral health and feel confident about visiting the dentist.

3.16 Information, activities and support are provided for parents and carers to support children's oral health.

This criterion recognises the important role early years settings play in promoting good oral health by working in partnership with families. By sharing consistent information and practical ideas, settings can help parents and carers build positive habits around toothbrushing, diet, and dental care from an early age.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting oral health.

In your response, consider the following questions:

What evidence-based information, resources or practical ideas do you share with parents and carers to help them understand the importance of oral health and support healthy habits at home?

Consider how you introduce topics such as toothbrushing routines, sugar intake, and regular dental check-ups. Reflect on the activities you offer that involve children and families such as workshops, take-home packs, themed events.

How do practitioners create opportunities to talk with parents and carers about their child's oral health needs, routines, or challenges in a supportive and nonjudgemental way?

Reflect on how oral health is raised during everyday conversations, key person meetings, or health discussions.

Physical activity and health

- 3.17 Staff, the environment, routines and activities
- enable children to be physically active, both inside and outside
- enable children to access outdoor space every day and in all weathers
- support children to meet the Chief Medical Officers' recommendations for the amount and type of activities for under-fives, including not yet walking (see pg.21-23)

This criterion highlights how early years settings promote physical activity as a daily part of every child's experience, supporting healthy development, movement skills, and overall wellbeing. It applies to all children, including babies and those not yet mobile.

In your response, consider the following questions:

How do practitioners actively promote and encourage physical movement throughout the day, both indoors and outdoors, for all children?

Consider how staff interact with children during active play, model movement, and adapt activities for different abilities.

How does your indoor and outdoor environment encourage children to move freely, be physically active, and explore through a range of movement and play opportunities?

Reflect on how your space is organised, whether children have access to a variety of spaces and equipment that support large and small movements.

How do you ensure children can access outdoor space every day, in all types of weather, and how do you work with families to prepare children appropriately?

Think about how you overcome barriers to outdoor play (for example, clothing, attitudes, staffing) and make it part of your everyday routine.

3.18 Children are supported to take appropriate risks in their play and to test ideas through trial and error.

This criterion focuses on how early years settings create an environment where children feel safe, confident, and curious enough to explore, experiment, and challenge themselves through play. Supporting risk-taking and problem-solving helps children develop resilience, independence, and critical thinking skills.

In your response, consider the following questions:

How do practitioners support children to take safe, age-appropriate risks in their play?

Reflect on how adults assess and manage risk without limiting opportunity, and how they respond when children try something new. Consider whether your learning environment (both indoors and outdoors) offers open-ended materials and spaces where children can explore, climb, balance, build and move in different ways, promoting physical and cognitive risk-taking.

How are children encouraged to test their own ideas, make predictions, and learn through trial and error?

Think about how you foster problem-solving through play, support persistence, and help children reflect on what works and what doesn't. Reflect on how staff support a positive attitude to mistakes, helping children build resilience, self-regulation and confidence when challenges arise.

3.19 Practitioners ensure physical activities are accessible and inclusive for all children, including those with SEND.

This criterion highlights the importance of ensuring that all children, including those with SEND have regular and meaningful opportunities to be physically active. Physical development is fundamental to children's overall wellbeing, learning and confidence, and practitioners have a responsibility to plan for inclusive, engaging movement experiences.



Include in your response <u>a specific practical, real-life example</u> of how you have adapted physical activities to ensure they are accessible to a child/ren with SEND.

In your response, consider the following questions:

How do you plan and adapt physical activities to ensure all children including those with SEND can take part meaningfully and safely?

Consider how you modify equipment, space, or expectations to meet individual needs and abilities. Reflect how you ensure physical activities promote confidence, enjoyment, and engagement for children with a range of physical, sensory, or developmental needs.

How do you monitor the accessibility and effectiveness of physical opportunities for children with SEND in your setting and make changes when necessary?

Consider how you observe and reflect on physical opportunities provided, whether children are actively included and whether changes are made when barriers are identified.

3.20 Active travel is supported and encouraged, both for journeys to and from the setting and for trips.

This criterion recognises the role early years settings can play in promoting healthy, environmentally friendly ways of travelling. Encouraging active travel, such as walking, cycling or scooting, not only supports physical development and wellbeing in young children but also contributes to sustainability and community connection.

In your response, consider the following questions:

How do you encourage families to choose active travel options, such as walking, scooting, or cycling, for journeys to and from the setting when possible?

Consider how you promote these options through newsletters, conversations, or displays, and how you acknowledge families' efforts. Reflect on facilities or practical support you offer to make active travel more accessible and appealing (for example, buggy parks, bike/scooter storage, safety messaging)

How do you incorporate walking or physical travel into regular outings or local trips with children?

Think about how you use the local area to build movement into daily experiences and model active lifestyles.

3.21 Information, activities and support are provided for parents/carers to support children's physical activity.

This criterion recognises the importance of working in partnership with families to encourage young children to be physically active every day. Early years settings can play a key role in helping parents understand the benefits of active play, offering practical ideas, and supporting healthy habits at home.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting physical activity.

In your response, consider the following questions:

What type of evidence-based information, resources or practical ideas do you share with parents and carers to help them support their child's physical activity at home?

Consider resources such as activity suggestions, newsletters, signposting to trusted websites. Think about how you engage parents in promoting active lifestyles, such as through home challenges, workshops, or shared activities between home and setting.

How do you make sure the physical activity information and ideas you provide is inclusive, practical, and suitable for families with different routines, access to space, or physical ability?

Reflect on whether your approach considers families living in flats, without gardens, or with children who have SEND.

How do you create regular opportunities to talk with parents and carers about their child's physical development, movement skills, and levels of activity?

Reflect on how these conversations are built into key person relationships, progress meetings, or informal daily interactions. Consider how confident staff are in offering

advice or practical suggestions to support physical activity at home, particularly when a child may be less active or has specific needs.

3.22 Practitioners advise parents and carers on children's safety to support accident prevention and reduce child injuries for example, road safety, home safety, water safety, online safety.

This criterion recognises the key role early years practitioners play in promoting children's safety and wellbeing by working in partnership with families. Sharing clear, practical advice helps parents and carers reduce risks and prevent common injuries in everyday environments, both at home and in the community.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around children's safety.

In your response, consider the following questions:

How do you provide parents and carers with evidence-based information or guidance on preventing common childhood accidents, both in and out of the home?

Consider how you share tips on topics such as road safety, burns, choking, falls, and water safety and whether the information is timely and accessible.

How do you share evidenced-based information and advice on digital and online safety in an age-appropriate and practical way for families with young children?

Think about how you help parents understand early screen habits, supervision, and safe device use.

Communication and language

Speech, language and communication

3.23 Practitioners plan and use a range of strategies to support children's language and communication development.

This criterion focuses on the role that early years practitioners play in supporting every child's communication and language development. Through warm, responsive interactions and intentional planning, practitioners help children build the skills they need to express themselves, understand others, and engage meaningfully with the world around them.



Include in your response <u>a specific practical, real-life example</u> of an activity or approach you have used to support children's communication and language development.

In your response, consider the following questions:

How do you use daily routines and everyday play opportunities to model and encourage interactions?

Consider how these moments are intentionally used to support language development in real, meaningful contexts.

What strategies do practitioners use to support and extend children's communication?

Consider approaches such as commenting, repeating, expanding, using open-ended questions, and giving children time to respond. Reflect on how these strategies are consistently used and how they are adapted for children at different stages of development.

What activities or programmes are used to build children's communication skills?

Think about how books, songs, storytelling, role play, and small group work are used

to support language in engaging ways. Mention any specific programmes you are using.

How do you plan and adapt activities to meet the communication needs of all children, including those with speech, language or communication delays, EAL, children who are deaf or have a hearing impairment or SEND?

Think about how you use visual supports, or incorporate Makaton/British Sign language or other tools.

3.24 Practitioners recognise when a child's speech, language and communication is not following a typical pattern of development.

This criterion emphasises the crucial role early years practitioners play in noticing when a child may be struggling with speech, language or communication. Identifying these needs early enables appropriate support and intervention to be put in place, helping children make progress and reducing the likelihood of future difficulties.



Include in your response <u>a specific practical, real-life example</u> for a child/ren in your setting, explaining how you recognised there was a need and what you did

In your response, consider the following questions:

What strategies and tools do you use to observe and assess children's speech, language and communication development, and how do these help you identify when a child may need additional support?

Consider whether you use structured tools (for example, WellComm, ECAT), alongside daily observation and key person insight.

What are your setting's referral routes when you have concerns about a child's speech or language development, and how do you ensure referrals happen in

a timely and supportive way?

Think about your links with speech and language therapy services, health visitors, or your local SEND support pathway. Consider how you share and embed SaLT strategies into daily routines, how regularly you communicate with parents and therapists, and how you track progress and adapt your approach based on the child's needs.

3.25 Practitioners know how to support children who have English as an additional language.

This criterion emphasises the role of early years practitioners in supporting children who are learning English as an additional language (EAL), ensuring they feel included, understood, and confident to participate fully in the life of the setting. It recognises the importance of valuing children's home languages, cultures and identities, while providing meaningful opportunities to develop English in a supportive and language-rich environment.



Include in your response <u>a specific practical, real-life example</u> of when you have supported a child with EAL, including how you supported the parents/carers.

In your response, consider the following questions:

What strategies do you use to support communication and language development for children who are learning English as an additional language?

Think about how you use visual prompts, gestures, key words in home languages, repetition, simplified language, and buddy systems to aid understanding and support inclusion. Reflect on how you ensure that EAL children feel confident, included, and able to express themselves in your setting. Consider how you work with families to support their child's language development in both their home language and English for example, how you share strategies, celebrate bilingualism, and communicate with

parents in accessible ways such as translated materials, use of interpreters, visuals.

3.26 Information, activities and support are provided for parents/carers to support children's communication and language development.

Early years practitioners play a vital role in helping families support their child's communication through everyday routines. This criterion emphasises working in partnership with parents and carers to promote children's language development both in the setting and at home, including recognising when additional support may be needed and working together to provide it.



Explain how you meet this criterion by describing the support you offer to parents/carers specifically around supporting communication and language development

In your response, consider the following questions:

What types of evidence-based information, resources and practical ideas do you share with parents/carers to help them understand and support their child's communication and language skills at home?

Consider whether you offer ideas such as songs, stories, games, and advice on talking during everyday routines.

What kinds of activities or workshops do you offer to actively engage families in supporting language development (for example, rhyme time sessions, reading sessions, take-home packs)?

Think about how these opportunities promote shared learning between home and the setting.

How do you work in partnership with parents to agree on next steps or strategies to support their child's language and communication at home and in the setting?

Reflect on how you involve families in decision-making and build on what they already do at home.

Section 4: Linking with the local community and signposting to external services

This section focuses on how your setting connects with the wider community to enhance the support you offer to families. It recognises the important role practitioners play in helping families access trusted services, resources and opportunities beyond the setting that promote health, wellbeing and inclusion.

4.1 Practitioners signpost parents/carers to local and wider activities and specialist services.

This criterion highlights the important role early years practitioners play in supporting families beyond the setting by connecting them with relevant services, groups, and opportunities in the wider community.



Tick all services/activities that apply Add any others in where relevant



Describe a specific practical, real-life example of how you have supported a family to access external activities or specialist services, word count 100-200 words

4.2 Children and families are supported and encouraged to care for resources and the environment, within the setting, at home, and in the local community.

This criterion focuses on fostering a culture of respect, responsibility and sustainability in early years settings. It encourages children and families to take an active role in looking

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after their environment (both indoors and outdoors) and to understand how their actions can have a positive impact on their community and the wider world.



Include in your response <u>a specific practical, real-life example</u> of an activity or approach you have used to support developing sustainable practices.

In your response, consider the following questions:

How do you model and teach children to respect and care for the toys, materials, and shared spaces in your setting?

Consider how daily routines, expectations, and language reinforce responsibility and care.

What activities and discussions do you provide to help children understand their role in looking after the natural environment (for example, recycling, growing food, reducing waste)?

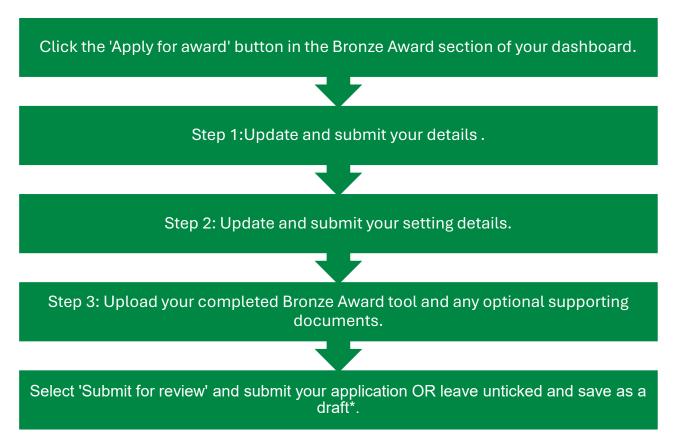
Reflect on how you make environmental awareness part of everyday learning in meaningful, age-appropriate ways.

How do you engage families in promoting environmental responsibility at home and in the community?

Think how you inspire families to extend positive habits beyond the setting through shared projects, sustainability-focused events, connecting families with local initiatives. Consider how you foster a sense of belonging, care, and community action

Bronze Award submission process

All Healthy Early Years London award applications are submitted through your setting's online dashboard:



*If you save an application as a draft, the button will display 'Continue draft' on your dashboard.

When returning to a draft application with files already uploaded, the system will display this message:

"Files have already been successfully uploaded as part of this application. You may submit the application without any further action to keep these files as part of the application or, overwrite the previously saved files by uploading new files below."

Bronze renewal guidance

Achieving the Bronze Award recognises that your setting has established a high-quality, whole-setting approach to health and wellbeing. It demonstrates that key policies and practices are in place and embedded in your setting, laying the foundation for Silver and Gold Awards.

However, to ensure these approaches remain up to date and meaningful, the Bronze Award must be renewed every three years. Renewing the award provides a valuable opportunity to:

- Review and refresh your setting's work on health and wellbeing
- Celebrate what's working well
- Identify areas for improvement or development
- Plan your next steps toward a Silver or Gold Award

Bronze Award renewal process

The Bronze Award renewal process has two parts: update and reflect.

First, you'll review and update your original Bronze Award tool to capture any improvements or changes. Then, you'll complete a short reflection to consider your progress, future priorities, and next steps.

Update

As part of the Bronze Award renewal process, you should review your original Bronze Award tool in full and update any sections where your setting's policies, practices or provision have changed, improved, or expanded since the award was first submitted.

This is your opportunity to:

- Reflect on what has developed or been strengthened in your setting's approach to health and wellbeing.
- Provide the most accurate and up-to-date picture of your current provision.
- Showcase areas of improvement or innovation that have taken place since achieving your Bronze Award.

You do not need to rewrite the entire document, only revise the relevant criteria where updates are needed.

Reflect

This stage of the Bronze Award renewal process encourages your setting to pause and reflect on your progress, priorities, and next steps for health and wellbeing.

Complete the three short reflection questions at the end of the renewal tool:

• Areas identified for further development:

Identify any specific criteria you plan to strengthen or improve going forward. These might relate to curriculum, environment, staff training, or targeted support. Examples could include building staff confidence in supporting social and emotional development, improving learning around oral health, or increasing physical activity opportunities for less active children.

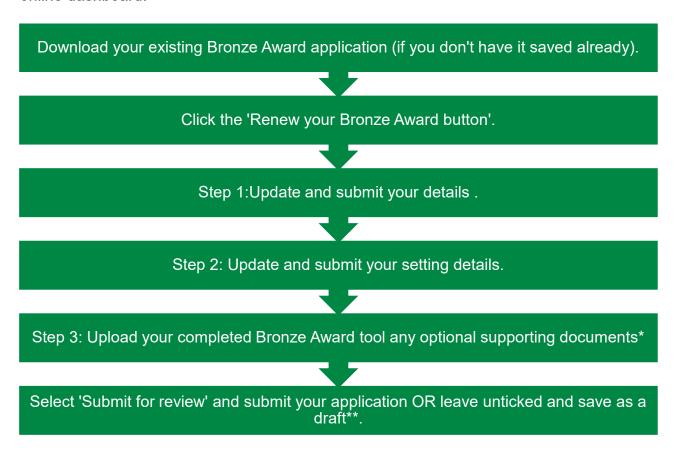
Next steps:

Outline what actions your setting will take next to build on your progress. Will you update a policy, introduce new activities, or complete further training? Use this space to note whether you plan to begin a Silver Award project focused on one of your development areas.

- Reflections on Silver or Gold Awards (if applicable):
 - If you've already achieved a Silver or Gold Award, reflect on how that work is progressing.
 - For Silver, describe how the action plan is being delivered and how outcomes are being tracked.
 - For Gold, highlight the sustained impact and any improvements or changes that have happened since achieving the award.

Bronze Award renewal submission process

All Healthy Early Years London award applications are submitted through your setting's online dashboard:



^{*} A pop-up will inform you that 'Uploading a new file will overwrite the previous file on the system'.

^{**}If you save an application as a draft, the button will display 'Continue draft' on your dashboard.



The Silver Award tool evidences you have identified a health and wellbeing priority and devised a new approach, project, practice or intervention to target the priority.



To achieve a Silver Award, your setting should:

- Hold an in-date HEYL Bronze Award
- Identify the health and wellbeing issues affecting children in the setting (needs analysis)
- Use the information gathered (needs analysis) to identify and define group/s and number of children for example, whole setting (universal) or targeted group of children
- Develop a project with planned measurable outcomes and an action plan to achieve these outcomes
- Show how it will monitor and evaluate the project to measure success and demonstrate improvements

This guidance is designed to support you to work your way through the Silver Award tool.

Purpose: What are you trying to achieve?

This section is the foundation of your Silver Award action plan. It asks you to clearly define the health and wellbeing priority your setting is focusing on, and to explain what you are trying to achieve, and for whom.

Health and wellbeing priority:

Your chosen priority should be informed by a needs assessment. This is gathering information and finding out the health and wellbeing issues affecting children in your setting – it could include data, observation, discussion with parents, child's voice, practitioner reflections.

Looking at the information you've gathered (needs analysis) will help you decide which health and wellbeing priority to focus on. Your chosen priority should reflect an area where you want to make measurable improvement for children, staff, or families.

In your response, you should tick one health and wellbeing priority from the list below:

- Social and emotional health and wellbeing
- Independence in managing self and hygiene
- Oral health
- Healthy eating, breastfeeding and starting solid food
- Physical activity and health
- Speech, language and communication
- Family wellbeing

When you submit your Silver Award application online, you will also be asked to select one or more focus areas.

For example:

Main Priority – Healthy eating, breastfeeding and starting solid food Focus area – Healthy eating and food growing

Main priority	Focus area
Settings must select one	Settings must select at least one focus but can select
main priority for their Silver	multiple.
and Gold Award.	
	Mental health
Social and emotional	Transitions
health and wellbeing	SEND needs
	Curriculum and teaching and learning
	Impact of Covid
	Online safety, screen time, digital literacy
	Self-regulation
	Attachment and relationships
	Self-esteem and confidence
	Other – Please indicate the focus
Independence in managing	Personal hygiene
self and hygiene	Self-care needs
	Immunisation
	Toileting needs
	Health awareness
	SEND needs
	Other – Please indicate the focus
Oral health	Oral health awareness
	Supervised toothbrushing
	Access to dental services
	Other – Please indicate the focus
Healthy eating,	Healthy weight
breastfeeding and starting	Healthy eating
solid food	Food provision
	Food growing
	Breastfeeding and infant feeding
	Baby friendly initiative

	 Food poverty/insecurity SEND needs Other – Please indicate the focus
Physical activity and health	 Physical activity Active travel Play, including risky play Gross and fine-motor skills Home safety, accident prevention and reducing injuries Preventing unplanned hospital admissions for under 5s Long-term conditions prevented and managed Asthma Air quality SEND needs Other – Please indicate the focus
Speech, language and communication	 Speech and language development English as an additional language Communication and social skills SEND needs Other – Please indicate the focus
Family wellbeing	 Domestic abuse Mental health Alcohol and substance misuse Smoking and vaping Vaccination hesitancy Cost of living Poverty and deprivation Maternal health Other – Please indicate the focus

Needs analysis: Why are you focusing on this priority and who will benefit?

National and local data and evidence:

This section asks you to show how your selected health and wellbeing priority links to national, regional, or local public health priorities and evidence. This helps demonstrate that your project is not only meaningful for your setting but also aligned with wider population health needs and best practice.

In your response, you should include a range of evidence to support your chosen priority. This might come from:

Data sources

Include any relevant statistics that highlight the scale or urgency of the issue you're addressing. This might include:

- Local Authority Child Health Profiles
 (for example, obesity rates, mental health needs, physical activity levels, oral health indicators)
- Your borough's Joint Strategic Needs Assessment (JSNA)
- Ward-level or local deprivation data
- · National or local early years survey data

Examples:

The 2023 Child Health Profile for our borough shows that 11.3% of children in Reception are classified as obese; including overweight children, this figure rises to 22.6%.

In our borough, many young children are showing delays in their development, especially in communication and language. Recent figures show that nearly 1 in 4 children aged 2 to $2\frac{1}{2}$ are not meeting expected levels, higher than the national average of 17.4%.

Guidance and reports

Reference national and local strategies, frameworks, statutory guidance or reports that support your priority.

These might include:

- Department for Education (for example, EYFS)
- Office for Health Improvement and Disparities (OHID)
- Public Health England (legacy content)
- Your Local Authority's Health and Wellbeing Strategy
- · Government obesity, oral health or mental health policies
- Organisations for example, Royal foundation Centre for Early Education, Education
 Policy Institute, Coram Family and Childcare

Examples:

Tooth decay in young children is a national issue. The OHID reports 22.4% of 5-year-old children in England have tooth decay (National Dental Epidemiology Programme for England, 2024) For children at risk, it can happen early in life. The oral health survey of 3-year-olds in 2020 found that 11% had visible tooth decay. The cause of dental decay is well understood, and the majority of dental decay is preventable.

Evidence shows that well developed social and emotional skills are essential for our mental and physical health. These have their foundations in early childhood and parents and other caring adults play a vital role in supporting the development of these skills (The Shaping Us Framework, Royal Foundation Centre for Early Childhood, 2025).

Evidence-based practice

Refer to research and best practice that demonstrates why your selected approach will be effective for your children. This might include:

- Education Endowment Foundation (EEF) for example, Early Years Evidence Store
- Non-statutory guidance for example, Development Matters, Birth to five Matters,
 EYFS Nutrition guidance

- Organisations for example, Royal foundation Centre for Early Education, A Better Start, Anna Freud
- Peer-reviewed research or recommended models of good practice

You can also include how your setting might adapt this evidence for your own context or individual needs (for example, SEND).

Example:

The EEF's Early Years Evidence Store, approaches and practices to support communication and language development in the early years, highlights that strong communication and language skills are crucial for young children's development and future learning. It recommends using multiple approaches to support the development of children's communication and language, including high-quality interactions, storytelling and play and engaging families to support language development at home.

Setting data and evidence:

This section focuses on your setting's needs analysis which is key to identifying and understanding the specific health and wellbeing priorities affecting your children, families and staff. The aim is to ensure that your Silver Award action plan is based on real evidence from your setting, not just general borough or national data.

In your response, you should describe the evidence your setting has gathered to inform your chosen priority.

This might include:

- Parent/carer surveys or feedback through discussions or conversations for example,
 about oral health, physical activity, eating habits at home
- Practitioner observations for example, behaviour patterns, children's independence skills, eating habits in the setting
- Child's voice for example, discussions with children, children's comments during play
- Practitioner reflections or feedback

Examples:

We recently surveyed parents and carers to learn about children's experiences with going to the dentist. Of the 45 families, 38 responded. The results showed that 68% of children had seen a dentist in the past year, 11% had not been for over 12 months, and 21% had never been. Some parents were unsure about when to take their child to the dentist or how to register, while others mentioned difficulties getting appointments or managing their child's anxiety. We plan to provide support and activities to help our parents with this.

Over several weeks, practitioners observed that many children regularly avoided healthy foods at snack and mealtimes. Some ate very little, refused food, or needed support with basic routines like using cutlery or sitting at the table. In response, we plan to offer more food-based learning activities and share healthy eating guidance with families.

During outdoor play, we noticed one child regularly avoids physical activities, saying, "I don't like running" and "It's too noisy outside." They prefer quiet play and staying close to adults. We plan to offer support for the child and parents to develop their confidence with engaging in physical activities.

Group:

In this section, you will describe who your chosen health and wellbeing actions are aimed at, and why you have chosen to focus on that group. This could include a whole-setting focus or a specific target group of children that has been identified through your needs analysis.

In your response, you should include:

1. Define the group/s who will benefit

Be clear about whether your actions will apply to:

 Whole setting: This means your plan will reach all children in the setting through a universal, whole-setting approach.

Example:

All children will benefit from increased opportunities for physical activity in the outdoor environment.

 Targeted group: Your plan may also include focused work with a specific group of children who have been identified through your needs assessment as having distinct health and wellbeing needs.

Example:

3 children who rarely access the outdoor environment will receive targeted support to help them feel confident engaging in the physical activities on offer.

You can include both a universal and a targeted focus in your plan.

2. Explain why you have chosen this group

Use evidence from your needs assessment to explain why you have chosen this group for your project. Be clear about the issue you are addressing and the impact it's having on your chosen group.

Example:

Observations showed that opportunities for physical activity in the outdoor environment were limited and not engaging the children's interest. It was also noticed that three children rarely chose to access the outside space, and did not chose to engage in any of the physical activities on offer.

3. Address inclusion and health inequalities

Describe how your work will be inclusive of children who may face additional barriers to health and wellbeing, including:

- Children with Special Educational Needs or Disabilities (SEND)
- Children in receipt of the Early Years Pupil Premium
- Children with English as an Additional Language (EAL)

Other groups experiencing inequity or disadvantage

This could include adapting delivery, offering flexible or sensory-friendly environments, or involving families where appropriate.

Example:

Our approach to supporting emotional regulation includes sensory-friendly activities for a child with autism and will be adapted in partnership with the parents to meet individual needs.

Planned outcomes and monitoring: How will you monitor and measure the results?

Planned outcomes & monitoring & measurement methods

This section asks you to set out clearly what you want to achieve (your outcomes) and how you will measure success. Strong outcomes start with a whole-setting approach focusing on changes that embed health and wellbeing into your practice, routines, culture, and policies. From this foundation, you can then monitor the impact on individual children, staff and families.

Planned outcomes: You should list a minimum of 3 and a maximum of 7 outcomes, which can be a mix of:

Whole setting outcomes

Your planned outcomes should be led by the changes you are aiming to make across the setting, such as:

- Policy and curriculum development with focus on health and wellbeing
- Embedding daily routines that support physical and emotional health
- Staff training and confidence
- Changes to the learning environment (indoors or outdoors)

Individual outcomes

Once you've identified your whole-setting outcomes, think about the measurable differences you hope to see in:

- Children's behaviour, understanding, attitudes, or involvement in activities
- Practitioner confidence and practice
- Parental/carer engagement, knowledge or understanding

Your final plan should include a mix of whole-setting and individual outcomes, with your setting-level actions forming the foundation for any individual changes.

Your outcomes should be SMART:

- Specific
- Measurable
- Achievable
- Realistic
- Time-bound

SMART Example:

Introduce a daily 5-minute mindfulness routine in the morning for all 3-4 year olds, with at least 80% children participating regularly.

Not SMART:

Introduce mindfulness in the setting.

Examples of Whole-Setting Outcomes:

- To increase staff confidence in supporting self-regulation from an average rating of 2 to 4 (out of 5) in a staff self-assessment.
- To increase families engagement in health and wellbeing related initiatives, from 50% to 70% of families participating in at least one wellbeing related workshop, session or home activity each term.
- To support all children to recognise and express their emotions, with at least 85% showing progress in self-regulation and wellbeing through daily routines and planned activities.

To develop a calming, sensory area in the outside space.

Examples of Individual Outcomes:

- To increase the percentage of children who can name and talk about their feelings with adult support, from 36% (9/25) to 72% (18/25)
- To increase percentage of children who eat two portions of fruit or vegetables daily in the setting, from 55% (22/40) to 75% (30/40)
- To increase the number of parents who feel confident about supporting their child's oral health from 50% (17/35) to 75% (26/35)

Monitoring and Measurement Methods: You should use a range of tools to measure both the implementation of your activities and the impact, including both quantitative and qualitative methods.

Quantitative Methods involve collecting and using numbers or data that can be measured and counted, such as percentages, scores, or frequencies, to help understand patterns or outcomes, such as:

- Staff surveys or audits
- Parent surveys
- Snack or meal choice tallies (for example, how many children choose fruit each day)
- Participation counts (for example, number of children taking part in an activity or group)
- Development tracking data (for example, EYFS assessment checkpoints or termly progress summaries)
- Incident logs (for example, number of behaviour or wellbeing concerns over time)
- Physical activity logs (for example, how often outdoor play is accessed)
- Toilet training or independence skill records (for example, percentage of children who can wash hands independently)
- Workshop attendance data (for example, how many families attend a healthy eating session)

Example of quantitative method:

You count how many children choose fruit at snack time each day for two weeks. Before the project, you calculated that 40% (18/45) regularly choose fruit. After you implemented the project, you count again using the same method and you calculate that 64% (29/45) of children regularly choose fruit. This helps you measure the impact of your healthy eating activities using numbers (quantitative data).

Qualitative Methods involve collecting descriptive information like words, observations, or stories to understand people's experiences, feelings, or behaviours, such as:

- Informal conversations with parents/carers during drop-off/pick-up
- Observations of children's play, language, interactions and emotional responses
- Learning journals or child profiles that capture development over time
- · Reflective diaries or logs kept by practitioners
- Story-based feedback (for example, "a day in the life" or case studies of individual children)
- Floor books where children contribute ideas through drawings, photos or scribing
- Group time discussions using puppets, picture cards or stories to explore feelings and preferences
- Parent workshops or stay-and-play sessions with follow-up reflection
- Co-design activities where children or parents help shape changes to routines or the environment

Example of qualitative method:

You hold an informal drop-in session for parents/carers to support with toilet-training, and you gather informal feedback through short conversations and a comment wall. These conversations and comments can help you understand how helpful the parents/carers found the session, what they learnt and what they intend to try at home to support their child.

If you're unsure how to structure your outcomes, baseline data or data collection methods, your Borough Lead can help you create a focused and measurable plan.

Action plan: What do you intend to do?

Approaches, activities, practices, or interventions, timescale & lead

This section is where you outline the specific actions you will take to deliver the changes identified in your needs assessment and achieve the planned outcomes. Your action plan should focus on new or enhanced approaches, practices, activities or interventions or that will support children, staff and families.

You should use the table provided to clearly list:

- The approach, activity, change in practice or intervention that you plan to implement
- The timescale (start and end date, using month and year)
- The member of staff responsible for leading or coordinating the activity

Your plan should include actions for the following groups:

- Staff
- Children
- Parents/carers

Approaches, activities, practices and Interventions

Focus on **new approaches**, **practices**, **activities or interventions** that directly respond to implementing your planned outcomes. Include any external partners, services or resources that will support your activities.

Examples:

- Creating a cosy wellbeing area with books, sensory items, and calm-down strategies
- Starting regular movement sessions (for example, yoga, obstacle courses, or nature walks)
- Planning small-group activities focused on friendship, empathy, and turn-taking
- Training staff in mental health awareness or trauma-informed practice
- Creating a staff wellbeing plan (for example, supervision, peer support, or quiet space)

- Healthy eating workshops for families
- Parent workshops on oral health
- Whole-setting campaign to promote active travel

Timescale

Provide a clear month and year for each activity. If an activity runs over time, show both the start and end point. This will help track progress and ensure your action plan is realistic and time-bound.

Lead

List the staff member responsible for delivering or overseeing each action. This person will ensure the activity happens and monitor progress.

Silver Award submission process

All Healthy Early Years London award applications are submitted through your setting's online dashboard:



^{*}If 'Apply for Award' button doesn't appear for the Silver Award, this means that your Bronze Award is not in date and will need renewing.

^{**}If you save an application as a draft, the button will display 'Continue draft' on your dashboard.



The Gold Award tool recognises that you have evaluated the impact and sustained the outcomes of the new approach, project, practice or intervention in your Silver Award tool.

To achieve the Gold Award, your setting should:

- Hold an in-date HEYL Bronze Award
- Have achieved the HEYL Silver Award
- Record results and outcomes
- Reflect on approach taken
- Provide analysis of results and share impact
- Explain how activity is being sustained

This guidance is designed to support you to work your way through the Gold Award tool.



Results and impact: What have you achieved and what has been the impact?

Intended outcomes:

This section is where you reflect on the impact of your project. You should evaluate whether you achieved your planned outcomes and describe the difference your actions have made to children, staff, parents/carers, and the wider setting.

Your response should include:

- Achievement of your planned outcomes
 - o Clearly state whether each of your original SMART outcomes were achieved
 - o Use baseline and endline data (numbers and percentages) to show impact
 - o Refer directly to the planned outcomes you included in your Silver action plan
 - o Highlight both quantitative and qualitative results

Examples:

Outcome 1: Increase the number of children who have visited the dentist. (Target 75%)

• **Baseline:** September 2023: 35% (12/35)

• **Endline**: July 2024: 75% (26/35)

Target met

We introduced activities into our setting to promote good oral health through roleplay, stories, song, puppets. We also invited a local dentist in, who talked to the children about visiting the dentist. We created a leaflet with information for parents to raise awareness and spoke to them about the importance of taking their children to the dentist, which encouraged many parents to take their child to the dentist for the first time.

Outcome 2: Increase the number of parents who feel confident about supporting their child's oral health. (Target 75%)

• September 2023: 50% (17/35)

• July 2024: 80% (28/35)

Outcome exceeded

Parent workshops we held were well attended, particularly when we invited a local dentist to come and talk to the parents. We also started a supervised toothbrushing scheme in the nursery and we shared information with parents/carers and provided families with a toothbrush set to use at home.

Outcome 3: Introduce daily supervised toothbrushing for all children aged 3-4 in the setting. (Target 100%)

• Baseline (October 2023): 0% (0/20)

• Endline (March 2024): 95% (19/20)

Just below target

This was a new initiative that we introduced for children aged 3-4 within our setting. Most children enjoyed the daily toothbrushing activity and were happy to take part every day. However, one child refused didn't join in, and it has been difficult for his key worker to engage him in the daily toothbrushing sessions. We are working with his family (parents and older sister) to encourage awareness and interest in toothbrushing and will continue to support the family over the coming months.

You should include evidence where possible:

Such as:

- Parent or staff surveys and evaluations
- Before/after comparisons (observations, logs of engagement)
- Photos of activities, events, displays, or environments
- Quotes from children, staff, parents/carers who took part
- Visual data summaries

Unintended outcomes

This section is your opportunity to reflect on any unexpected results of your project whether positive or negative. Sometimes the actions we take to improve health and wellbeing have broader or different impacts than originally planned. Capturing these can be just as important as measuring planned outcomes.

Describe anything that happened as a result of your interventions that you did not plan for, but which still had a noticeable impact.

This could be:

Positive unintended outcomes, such as:

- A shift in **practitioner confidence**, **or enthusiasm** for health topics
- Increased family engagement, such as widening to include siblings, grandparents
- New community partnerships or links established
- Opportunity to join new initiatives or programmes, such as a programme through
 EEF research projects
- Development of new resources, routines or activities that spread beyond the original target group

Negative or challenging outcomes, such as:

- Lack of engagement or interest from the children
- Capacity or resource pressures
- Staff changes impacting delivery
- Parental disengagement or resistance

(If these occurred, explain how you addressed or learned from them.)

Examples:

Healthy Eating Week had a fantastic impact across the setting. Many children joined in with our recipe activity, which sparked lovely conversations about food and snacks during group time. Some children brought in pictures or talked about helping to make healthy snacks at home, and several parents told us they enjoyed trying new recipes together with their child.

Our review of children's communication and wellbeing needs in our pre-school room was so effective that we extended it across all rooms in the nursery. It helped us better understand each child's needs and led to tailored workshops and support strategies for every staff team, ensuring consistent, responsive practice throughout the setting.

Activities:

This section is where you review what was delivered as part of your action plan. You should explain whether your planned activities went ahead as intended, and if not, describe what changed and why.

You should also mention any external or unanticipated factors that affected delivery, positively or negatively, including opportunities you took advantage of or challenges you had to overcome.

Your response should include:

Whether each activity went ahead as planned:

- Was the activity delivered fully, partially, or differently?
- If it changed, why?

Any adaptations made and the reasons:

- Did you replace, postpone or expand activities?
- Were there unexpected opportunities you built in?

Any external or unanticipated factors that had an effect:

- Local authority projects or support
- Staff absence, capacity or funding issues
- Local community initiatives or projects

Examples:

We introduced a range of activities to help children recognise and manage their emotions. This included daily check-in boards using feelings visuals, calming routines during transitions, and story time focused on naming and understanding emotions. Practitioners modelled co-regulation strategies, such as breathing techniques and gentle problem-solving language.

Staff capacity meant we had to reduce the number of planned family physical activity workshops. However, we shared activity videos online instead. Feedback from parents showed this helped improve access, as families could join in at home and repeat the activities with their children whenever it suited them.

Lessons learnt:

This section is your opportunity to reflect on your experience delivering your project, thinking about what worked well, what challenges you encountered, and what you would do differently in future.

In your response, you should include:

- What went well? What successes would you want to repeat?
- What didn't go so well? What were the barriers or challenges?
- What would you recommend for the future? What would you change, improve or avoid next time?

Examples:

We introduced short mindfulness sessions to help children calm their bodies and minds. At first, the children were restless or unsure what to do, and a few became distracted during the activity. We realised that children needed more time, consistency, and modelling from adults to understand and benefit from the routine. After introducing mindfulness at the same time each day and joining in ourselves, children began to look forward to it and engage more calmly. We've learned that building mindfulness into the daily routine and keeping it short and playful makes it more successful for young children.

We held a series of healthy eating workshops for parents and carers, but not many attended at first. After asking for feedback, we found that the timing didn't work well for working parents. In response, we offered a range of morning and afternoon sessions and even had a family fun day on a Saturday centred around healthy eating. Attendance improved, and next time we'll involve families earlier in the planning.

Sustainability

This section focuses on how you will sustain and build on the progress you've made. Now that you've delivered your action plan, it's important to show how your new approach will continue to benefit children, staff, and families over the long term.

You should describe your next steps and explain how your work will be embedded, ensuring that the improvements made are not one-off, but part of a consistent and ongoing whole-setting approach to health and wellbeing.

Describe how you plan to continue and develop your approach.

This might include:

- Embedding your health and wellbeing approach into your setting's daily routines, curriculum planning, activities, environment
- Securing ongoing resources or funding through fundraising, local partnerships or grants
- Including relevant training in staff inductions, supervision, or ongoing professional development
- Building and maintaining partnerships with food providers, local health teams, early years specialists or community organisations
- Celebrating children's progress in health and wellbeing through displays, certificates or sharing achievements with families
- Keeping families informed and involved through regular updates in newsletters,
 parent boards, apps, or informal conversations

Examples:

Mindfulness is now a regular part of our daily routines, and staff, children, and families have shared how much they've benefited. We plan to develop this further by creating a new mindfulness area in the garden, co-designed with the children and featuring calming elements like chimes, flowers and sensory artwork.

We plan to keep the link we made with the local dental surgery and will continue to organise visits to the surgery with our children.

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We plan to create a recipe book of all the recipes we've tried in the nursery, which we will provide to our parents to try at home and include for future parents as part of our Welcome pack.

Photographs & quotes:

This section gives you the opportunity to bring your project to life by including visual and verbal evidence that supports the work you've described throughout the document.

These can be added here or included in the relevant sections of your report to support and illustrate your responses. Make sure any images are appropriate and consented, and that quotes are linked to the outcomes or activities you've described.

You can upload or embed:

- Photographs of activities, events, displays, or environments (use captions to explain what each photo shows or supports)
- Child, staff or parent quotes that reflect impact, engagement or feedback
- Written or visual feedback collected from surveys, focus groups, or journals

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