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Introduction

This guidance describes how Care and Social Services Inspectorate Wales (CSSIW) inspects services which are regulated under the Children and Families (Wales) Measure 2010.

These include child minders, childcare and open access play services for children up to 12 years of age.

The guidance sets out our new inspection framework including:

- the type and frequency of inspections;
- the duration of site visits;
- what happens during and after an inspection;
- the incremental implementation of ratings and
- the content of our inspection reports.

Our role

We inspect and regulate childcare services to make sure that they are both safe and promote children’s well-being. Through our inspections we:

- provide efficient, effective regulation and inspection of all childcare services and report our findings
- provide independent assurance for people who use services about the safety, quality and availability of childcare in Wales
- help to safeguard children and ensure their rights are protected and they are cared for by people who are suitable to do so
- improve to care and well-being outcomes for children
- make sure registered providers meet and continue to meet requirements of registration
- provide information to Welsh Government Ministers and the National Assembly for Wales about childcare.

The legal basis for inspection

We carry out our functions on behalf of Welsh Ministers whilst retaining our independence from Welsh Government.

We regulate and inspect child minders, childcare and open access play provisions for children up to 12 years of age under the:

- Children and Families (Wales) Measure 2010 (Amendment Order 2010)
- Child Minding and Day Care (Wales) Regulations 2010 and amended in 2016
- Child Minding and Day Care (Disqualification) (Wales) Regulations 2010
- National Minimum Standards for Regulated Childcare (March 2016)

More information about this can be found on the CSSIW website.

The expectation is that all services must comply with regulations and should meet the national minimum standards. There are a number of circumstances where a person providing care for children under 12 years of age will be exempted from regulations. These are set out in the Child Minding and Day Care Exceptions (Wales) Order 2010.

Our principles

Our work is based on a set of principles:

- **Being people focused** – we put people who use regulated services at the centre of our work and consider the impact of services on improving children’s well-being.

- **Supporting improvement** – we make judgements about services. We acknowledge best practice, identify poor practice and promote improvement in care and play services.

- **Transparency** – we strive to write clear reports so that people can understand the basis on which judgements are made.

- **Fairness** - we base our judgements on the evidence gathered as part of an inspection and provide an opportunity for providers to question factual accuracy and findings.

- **Being robust** – we take firm and timely action when services provide poor care or place children at risk.


Upholding the rights of children is at the heart of our work. We take account of the objectives of the United Nations Convention on the Rights of the Child (UNCRC) and the Welsh Government’s ‘Children Rights Scheme’ which are enshrined in the Rights of Children and Young Persons (Wales) Measure 2010.

The relevant articles of the UNCRC are embedded within our inspection framework and inspectors will consider how providers promote children rights, to ensure children have a voice and they are kept safe, nurtured, treated with respect and helped to develop their full potential.
The conduct of inspections

It is imperative that inspections are undertaken in the interests for those who use services in order to promote their well-being and to ensure their protection. It is essential that inspections are approached on the basis of mutual courtesy and respect between inspectors and those running services.

Code of conduct for inspectors

All inspectors have to meet the standards in the Civil Service Code of Conduct. When conducting the inspection, inspectors will:

- carry out their work with integrity, courtesy and sensitivity;
- evaluate the work of the service objectively;
- report honestly, fairly and impartially;
- communicate clearly and openly;
- act in the best interests of children;
- respect the confidentiality of all information received during the course of their work and
- produce proof of identity confirming their authority to enter and inspect.

Expectations of services

We expect those running services to:

- be courteous and professional;
- apply their own codes of conduct in their dealings with inspectors;
- enable inspectors to conduct their inspection in an open and honest way;
- enable inspectors to evaluate the provision objectively against the inspection framework;
- provide evidence that will enable inspectors to report honestly, fairly and reliably about their provision;
- maintain a purposeful dialogue with the inspector or the inspection team;
- recognise that inspectors need to observe practice and talk to staff and others without the presence of the person in charge;
- draw any concerns about the inspection to the attention of inspectors or CSSIW in a timely and suitable manner;
- work with inspectors to minimise disruption and stress throughout the inspection and
- ensure the health and safety of inspectors whilst on their premises.

Self Assessment of Service Statement (SASS) and annual quality review of care

Each year providers will be required to send us:

- a Self Assessment of Service Statement (SASS) and
- a review of the quality of care at the service.
These are required under Regulations 16 and 17 of the Child Minding and Day Care (Wales) Regulations 2010.

These documents enable us to assess how providers view themselves in terms of quality against the four key themes of the inspection framework ahead of an inspection. We expect providers to be open and honest with us, sharing all appropriate information. Providers are asked to confirm that the information they submit is complete and accurate.

Failure to complete the SASS and the review of quality of care for a service may result in enforcement action being taken by us and will impact on our judgement (and subsequent rating) of the Leadership and Management of the service.

**Inspection types and frequency**

Our inspections are central to our regulatory model. They focus on the things that matter to children’s development and well-being.

We have developed a new approach to our childcare inspections and the frequency with which we inspect services. We have two types of inspections - **full** and **focused**.

**Full inspections** are routine inspections, planned according to our inspection schedule. They consider all four themes in the inspection framework and enable us to:

- provide assurance that the service is safe and compliant with core regulations and has appropriate systems and governance in place;
- review the registration of the service: testing whether the service still meets the requirements to remain registered and that its registration and Statement of Purpose together provide an accurate reflection of the service being provided and
- provide inspectors with an opportunity to make judgements about the quality of the service.

Full inspections take place approximately **six months after a newly registered service becomes operational**. Thereafter we will undertake full inspections:

- once in every two years for full day care and
- once every three years for all other childcare services - sessional day care, child minders, open access play, crèches and out of school care.

**Focused inspections** are normally undertaken in response to a concern or to follow up on areas of improvement identified at previous inspections. These inspections may only look at some aspects of a service. Our inspectors should always use the opportunity during a focused inspection to consider and comment on the well-being,
care and development of children, although this may not be in the depth or cover the age ranges / times of operation / different rooms and areas as we would in a full inspection.

All our inspections are unannounced, although for child minders and open access play, we will now normally telephone the service the week before we intend to inspect to check the operating times and the child minder’s availability. This is in order to avoid missed visits.

This purpose of the call is to:

- check which days and times that the service is operating and
- establish the age range of children attending during the inspection week.

If the inspector has taken reasonable steps to make contact with the service but has not been able to speak to anyone, then an inspection will go ahead without prior discussion.

However, all services are reminded of their responsibility to inform us of any changes in their days and/or hours of operating. We will continue to inspect any service at any time, especially where concerns have been expressed about a service.
**Inspection framework**

Our framework (diagram 1) includes four themes which are divided into key areas:
- Well-being;
- care and development;
- environment and
- leadership and management.

Inspectors will make a judgement on the rating for each theme. They will not make an overall rating. At larger services they will take into account the range of services operating at different times of the day and in different places in the service.

**Diagram 1 (core framework)**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Key area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILDREN</strong></td>
<td></td>
</tr>
<tr>
<td>1 Well-being</td>
<td>1.1 To what extent do children have a voice?</td>
</tr>
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<td></td>
<td>1.2 To what extent do children feel safe, happy and valued?</td>
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<td></td>
<td>1.3 How well do children interact?</td>
</tr>
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<td></td>
<td>1.4 To what extent do children enjoy their play and learning?</td>
</tr>
<tr>
<td></td>
<td>1.5 How well do children develop, learn and become independent?</td>
</tr>
<tr>
<td><strong>PRACTITIONERS</strong></td>
<td></td>
</tr>
<tr>
<td>2 Care and development</td>
<td>2.1 How well do practitioners keep children safe and healthy?</td>
</tr>
<tr>
<td></td>
<td>2.2 How well do practitioners manage interactions?</td>
</tr>
<tr>
<td></td>
<td>2.3 How well do practitioners promote children’s play, learning and development and meet their individual needs?</td>
</tr>
<tr>
<td><strong>LEADERS</strong></td>
<td></td>
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<tr>
<td>3 Environment</td>
<td>3.1 How well do leaders ensure the safety of the environment?</td>
</tr>
<tr>
<td></td>
<td>3.2 How well do leaders ensure the suitability of the environment?</td>
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<tr>
<td></td>
<td>3.3 How well do leaders ensure the quality of resources and equipment?</td>
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<tr>
<td><strong>Leaders and management</strong></td>
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</tr>
<tr>
<td>4.1 How effective is leadership?</td>
<td></td>
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<tr>
<td>4.2 How effective is self-evaluation and planning for improvement?</td>
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<tr>
<td>4.3 How effective is the management of practitioners, staff and other resources?</td>
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<td>4.4 How effective are partnerships?</td>
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</table>
Annexes A and B provide more detail on what the inspector will evaluate against each area under the specific themes of the core framework. They also provide exemplar statements of what “good” may look like.

Annex B will be the framework that inspectors will use when inspecting open access play services to take account of the diverse circumstances that apply in the environmental, leadership and management themes. This also reflects the requirements in National Minimum Standards for open access play services.

**Safeguarding**

We aim to ensure safe and secure provision of care to children through effective regulation and inspection. Safeguarding the well-being of children is at the heart of our business and inspectors will always consider how well children are cared for and protected. Inspectors will always consider whether or not the arrangements for safeguarding children are effective as part of the inspection themes for well-being and leadership and management.

Inspectors will consider how well leaders and managers have created a culture of vigilance where children’s well-being is promoted and that timely and appropriate safeguarding action is taken where children may be suffering, or likely to suffer significant harm.

Where safeguarding concerns arise during an inspection, inspectors will take action to make a referral to the local authority or satisfy themselves that appropriate referrals have been made. Particular concerns may include delay or negligence in passing on concerns about a child at risk of or suffering significant harm to the relevant agencies. It is not the role of an inspector to investigate a child protection concern or an allegation against a member of staff.

**Inspectors will always consider:**

- the service’s child protection policies and procedures;
- circumstances where a member of staff is suspended and there is currently a safeguarding investigation taking place;
- failure to follow statutory requirements or locally agreed procedures for dealing with allegations against staff and
- failure to adhere to the legal duty to refer a member of staff who has harmed, or poses a risk of harm to, a child to the Disclosure and Barring Service (DBS).

The following statutory guidance should be taken into account:

Social Services and Well-being (Wales) Act 2014 - Working Together to Safeguard People
Prevent duty guidance for England and Wales: guidance for specified authorities in England and Wales on the duty of schools and other providers in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism


Concerns

Concerns raised by children, parents, others close to them, and staff working in a service are important sources of information that help us to understand the quality of care being provided. We consider how well providers handle concerns and complaints. We will draw on different sources of evidence to understand how well providers encourage, listen to, respond to and learn from concerns and complaints. Evidence sources may include complaint and whistleblowing policies, indicators such as a complaint log and staff survey results, speaking with children, parents, carers and staff and reviewing case notes.

We will use information from:

- people who contact us directly through our website and by phone;
- concerns shared with inspectors by children, parents and practitioners when they visit a service or completed surveys and
- concerns from other agencies e.g. Estyn, Fire Authority and Environmental Health departments.

Welsh language

We are committed to undertaking inspections in the medium of Welsh in Welsh language services, and publishing inspection reports in Welsh for Welsh speaking and bi-lingual services or in the language of choice of the registered provider.

We have given a commitment to make specific judgements in full inspections on what is known the “active offer” in relation to Welsh language provision. The ‘active offer’ means that the service is provided in Welsh without someone having to ask for it. Inspectors should record the most accurate statement within the Quality of Care and Development theme:

1. The service provides the ‘active offer’ in relation to the Welsh Language.
2. The service is working towards providing the ‘active offer’ in relation to the Welsh language or
3. The service does not provide the ‘active offer’ in relation to the Welsh Language.
Undertaking inspections - gathering and using evidence

To make the most of the time that we are on site for an inspection, we must make sure we have the right information to help us focus on what matters most to people. This influences what we look at, who we will talk to and the number of inspectors we might send. The information we gather during this time is also used as evidence when we make judgements about services.

In planning a site visit, inspectors will take account of what is known about a service and will complete an analysis of the information to identify key lines of enquiry for the inspection plan. Sources of evidence will include:

- previous inspection reports, including reports by Estyn (where relevant);
- statement of purpose;
- concerns received by us and notification of significant events;
- the Self Assessment of Service Statement (SASS);
- safeguarding information;
- the service’s own quality of care review report;
- any current or recent enforcement activity and
- feedback from parents, practitioners and children.

Reports will be based on the evidence found at the site visit and by taking into account what is already known about the service. In gathering evidence we place emphasis on people’s experience of the service, what they tell us and careful observation of how care is delivered and how children’s development and well-being outcomes are met.

At the beginning of an inspection, inspectors will:

- explain the purpose of the inspection and discuss an outline programme and plan for the inspection taking into account the impact on the service;
- ask that relevant documents be made available from the start of the inspection;
- ask if there are any issues or risks that we should be aware of and ask for a general health and safety briefing;
- ensure that there are agreed procedures for addressing any concerns or complaints that might arise during the course of the inspection;
- set up the arrangements for feeding back the inspection findings, including ratings and
- agree arrangements for completing post-inspection questionnaires.

Documents and information that inspectors are likely to require access to during inspection include:

- staff (practitioner) list, including details of qualifications and information about the supervision, training and continuous professional development of staff,
and staff recruitment procedures and records. Disclosure and Barring Service (DBS) records and any other documents summarising the checks on, and the vetting and employment arrangements of all staff and volunteers working at the service. In child minding services, records of checks for people over 16 years old that live or work at the premises or for those have regular contact with looked after children;

- safeguarding and child protection policies;
- behaviour management policies, including bullying;
- arrangements for meeting needs of children with medical conditions;
- log books of accidents, incidents and complaints;
- risk – benefits assessments, fire safety, and other policies relating to health and safety;
- a list of any safeguarding referrals made to the local authority and details of the resolutions;
- any reports of external evaluation of the service;
- confidentiality policy;
- records of attendance for children;
- records of attendance and rotas for all staff and volunteers;
- a sample of child development records and
- for open access play services, a self-assessment to establish the appropriate staffing ratios for children aged 8-12.

**Carrying out inspections**

Time spent at the site will vary depending on the type and size of the provision and the age range of children looked after. Most inspections, in particular child minders, will be carried out by one inspector.

**Normal duration of site visits:**
- Child minders - between three and five hours depending on the number and age range of children looked after;
- full day care - between four and seven hours. Where inspections are for large services they will normally be carried out by more than one inspector;
- open access play services - between three and six hours and
- sessional day care, out of school clubs and crèches – between three and six hours.

When inspectors have more complex issues or concerns to follow up they will spend longer at services.

Inspectors will:

- focus on the children’s development, well-being and experiences by undertaking observations of practice – inspectors will normally, in every full inspection, use the Short Observational Framework for Inspection (SOFI) 2 Tool, except during the inspection of child minders;
- gain the perspectives of children, their parents and staff/practitioners;
- scrutinise records and documents, including child development records;
- seek to make judgements that are fair and based on valid evidence;
be constructive in identifying and supporting services to work towards improvement;
inspect the suitability and safety of the premises and
seek the views of those in charge and running the service.

Providing feedback

At the end of a site visit, the inspector will provide initial feedback to those in charge of the service on the day, or will make arrangements to meet the registered person at a mutually convenient time where necessary. Inspectors will not have time to complete a proper analysis of the information they have gathered and may be waiting on more information before reaching any final conclusions.

The inspector will make a note of the feedback they give but will not leave any written report nor ask the person in charge/provider to sign the inspector’s account of the feedback. Providing feedback is an important opportunity to check and test the evidence the inspector may be relying on in their report. There should be a principle of “no surprises” and any concerns the inspector has at the end of the inspection and potential areas of non-compliance must be discussed.

Inspectors will ask for and record the person in charge/provider’s view on the fairness and conduct of the inspection at the end of the feedback, in addition to leaving a feedback form for their comments on the inspection.

Introducing ratings

It is our plan to introduce ratings. We will start awarding ratings for our inspection of full day care services from 2018. Other services - child minders, sessional day care, open access play services, crèches and out of school care - will be awarded ratings for inspections undertaken from 2019. We will award a rating against each of the four inspection themes.

To prepare providers for our introduction of ratings at the first inspection (after April 2016) inspectors will talk to providers about the quality of the service, and advise of the rating they would consider appropriate for each of the four themes. It is important to note that:

- this initial rating of the service will be informal;
- inspectors will not record the ratings in the published inspection report and
- future inspections will record ratings in the inspection report that we publish on our website.

Ratings will be made for each theme using a four point rating scale.

Excellent: These are services which are committed to ongoing improvement with many strengths, including significant examples of sector leading practice and
innovation. These services deliver high quality care and support and are able to demonstrate that they make a strong contribution to improving children’s well-being.

**Good:** These are services with strengths and no important areas requiring significant improvement. They consistently exceed basic requirements, delivering positive outcomes for children and actively promote their well-being.

**Adequate:** These are services where strengths outweigh areas for improvement. They are safe and meet basic requirements but improvements are required to promote well-being and improve outcomes for children.

**Poor:** These are services where important areas for improvement outweigh strengths and there are significant examples of non-compliance that impact negatively on children’s well-being. Where services are poor we will take enforcement action and issue a non-compliance notice.

**Our approach to deciding ratings**

Diagram 2 is the pathway that inspectors will take in arriving at a rating.

Ratings will be made on a series of incremental steps.

**Step 1 - Discharging our regulatory duty**

The first step is based on discharging our regulatory duty and the need to offer public assurance. We ask inspectors to consider for each theme if the service is providing safe, reasonable care in line with the regulations and National Minimum Standards.
If this is the case then the service has passed the threshold and can be rated at least as adequate.

If this is not the case, and the service is found to provide unsafe care which places children at risk or has poor outcomes then the theme must be rated as poor. This will result in a non-compliance notice being issued.

**Step 2 – Recognising quality**

The second step is to recognise quality. We have given a clear indication in our framework of what “good” may look like across the themes and areas for inspection.

Once a service has passed the “adequate” threshold, we ask inspectors to consider whether the service is performing at a level which could be regarded as good. To achieve “good” a service must have a high proportion of areas where there are strengths i.e. the service is performing at a level which matches our descriptors for what good may look like (see Annexes A and B).

We do not score or total the number of areas although this may aid inspectors in making a rating. Inspectors will consider all the evidence across the areas in each theme. Inspectors will decide whether on balance there is a strong case and evidence base to say that the service is performing at a level which can be rated as good. If this is the case the service can be rated as good.

Similarly if the service meets the additional requirements to be excellent (above) it will be rated as “excellent”.

**Inspection reports**

An inspection report is produced following each inspection. Our reports focus on the well-being outcomes for children and how each of the four themes contribute to a child’s well-being. We describe the good practice we find as well as any concerns we have about the service. In our reports we clearly set out any evidence about non-compliance together with any required action we tell the provider to take.

The inspection report may identify recommendations for improvement that will be followed up at the next inspection. The recommendations should give the service a clear and specific indication of the areas for improvement that it will need to address. An example report can be found at Annex C.

Further information about our open reporting policy can be found on our website.

**Non-compliance**

We focus our inspections on the experience and outcomes for children using services, whilst also taking into consideration appropriate regulations and National Minimum Standards. When the outcomes for children are poor, we will take action, which might include issuing notices of non-compliance; the urgent imposition of conditions on the registration of a service; or criminal prosecution. Our response to non-compliance is informed by the following key principles.
• **Provider responsibility**: Service providers are responsible for complying with regulations. Unless urgent action is required, providers will be given opportunities to rectify failings.

• **Proportionality**: When action is taken by us, this will be proportionate to the outcomes for children receiving services, the risk to their health and well-being and the readiness of the provider to achieve compliance. Our priority is to focus on those areas where non-compliance has a direct effect on the child’s well-being.

• **Efficiency and effectiveness**: Action taken by us will be clear, consistent, timely, fair and transparent.

• **Progressive action**: Providers who persistently fail to comply with regulations will face escalated enforcement action, including action to suspend or ultimately cancel their registration.

• **Working with others**: We work with other agencies, regulators and inspectorates to ensure that any action is co-ordinated and information and concerns are shared. This is particularly so when there are safeguarding concerns or health and safety issues overseen by other regulators.

Issues of non-compliance should form part of the feedback following the inspection and noted in the inspection report. Where a separate non-compliance notice has been issued, it will be published on our website and our non-compliance process will be followed.
## THEME

1.WELL-BEING

<table>
<thead>
<tr>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluations will always consider the child’s age, stage of development, additional learning needs and the child’s starting point, as well as the type of service they attend.</td>
<td>This is not a definitive list but provides examples of positive outcomes for children.</td>
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</tbody>
</table>

### 1.1 To what extent do children have a voice?

Inspectors should evaluate whether children:

- make choices and decisions
- are listened to and all attempts at communication are valued
- are encouraged to speak and express themselves
- express their views and know that their ideas will be listened to
- contribute to ideas for themes and topics.

- Nearly all children speak or express themselves well throughout the session and communicate their needs in a variety of different ways
- Nearly all children are confident to communicate because they know their home language is given due consideration
- Nearly all children that need a service through the Welsh language receive one
- Nearly all children know that practitioners understand their needs, preferences, feelings and non-verbal cues and that their individual needs take precedence over daily routines
- Most children make appropriate choices and decisions because they are aware of the options open to them and they recognise the rights of others to do the same
- Most children are consulted over a range of issues having regard to their stage of development
- Most children participate well and are encouraged to express their opinions and contribute appropriately to ideas about what they would like to do or learn
- Nearly all children have time and good support to make choices, find solutions and do things for themselves
- Most children understand the process for raising | Articles 2, 12, 23, 29 |
| 1.2 To what extent do children feel safe, happy and valued? | Inspectors should evaluate whether children: | • Most children generally cope well with separation from their parents/carers and feel safe because they are well supported during daily transitions from the home to the service, vice versa and internally  
• Most children are content and express enjoyment  
• Most children are familiar with the routine at the service which gives them a sense of security and is developmentally appropriate for their needs  
• Most children have bonds of affection with their key worker. As a result, they are comfortable, settled, relaxed and seek out familiar people who they know will help them and build their confidence  
• Most children gain a sense of belonging  
• Most children are developing relationships and forming friendships  
• Children feel valued and are confident that their feelings, likes, dislikes and concerns are taken into consideration or they are negotiated if they cannot be met. |
| --- | --- | --- |
| • are settled and cope with separation from their parents  
• form positive emotional attachments  
• feel secure, happy and comfortable and relaxed  
• feel valued and their rights are respected  
• have bonds of affection with practitioners who know them well and give them consistent care which fosters confidence and positive self-esteem  
• are forming friendships  
• know who to talk to if they are unhappy or worried about something  
• are confident that their feelings, likes, dislikes and concerns will be taken into account. | Articles 2, 12, 23, 29 | |
### 1.3 How well do children interact?

Inspectors should evaluate whether children:

- are resilient and can cope
- younger children are beginning to understand their feelings and are becoming sensitive to the emotions of others
- children are learning to manage their behaviour, co-operate, take turns and share, while younger children are beginning to develop a sense of right and wrong
- older children are self disciplined and set and comply with rules for socially acceptable behaviour.

- Almost all children interact and co-operate well with their peers and adults
- Most young children are becoming self-aware and are learning to express what they need
- Most children sustain interest in tasks and demonstrate resilience and appropriate coping strategies when dealing with change or disappointments
- Nearly all children are polite and use good manners
- Nearly all children take appropriate care of equipment and resources
- Most children are beginning to understand their feelings and emotions and are learning how to express them appropriately
- Most children are becoming sensitive to the emotions of others; they are becoming self disciplined and accept differences of race, gender, abilities, age and religions/cultures
- Most children know the rules of behaviour for their service and older children are involved in service rules. They show respect for property and people and understand the consequences of their actions.

### 1.4 To what extent do children enjoy their play and learning?

Inspectors should evaluate whether children:

- are active and curious learners
- engage in play based activities, are interested and excited
- persevere for an appropriate amount of time

- Most children are highly motivated and engaged in their play and learning but can also relax and enjoy quiet times
- Most children develop positive attitudes to new experiences, indoors and outside and maintain interest in independent tasks
- Children are able to explore their environment freely and safely
- Children have extended periods of child initiated, uninterrupted play as well as frequent opportunities for adults to play alongside the children

Articles 2, 12, 23, 29
<table>
<thead>
<tr>
<th>1.5 How well do children develop and become independent?</th>
<th>Inspectors should evaluate how well children:</th>
<th>Articles 2, 12, 23, 29</th>
</tr>
</thead>
<tbody>
<tr>
<td>to complete an activity</td>
<td>sustain interest in activities</td>
<td></td>
</tr>
<tr>
<td>gain a sense of achievement from what they do</td>
<td>enjoy organised, free play, leisure and recreational activities.</td>
<td></td>
</tr>
<tr>
<td>During practitioner led activities, most children concentrate for an appropriate amount of time for their stage of development and older children demonstrate that they have been paying attention by responding well</td>
<td>Most children are eager to show or talk about what they have been doing</td>
<td></td>
</tr>
<tr>
<td>Most children can influence the activities and tasks they undertake.</td>
<td>Most children are learning the importance of physical exercise, healthy eating and personal safety and older children are learning about healthy relationships</td>
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</tr>
<tr>
<td>Most children are able to accomplish things for themselves well because they have the appropriate self help skills</td>
<td>Most children show good initiative to complete tasks and to solve problems</td>
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<tr>
<td>Most children cope well with challenging experiences</td>
<td>Most children are naturally motivated to freely choose and personally direct their play.</td>
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<tr>
<td>THEME</td>
<td>WHAT IS EVALUATED</td>
<td>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</td>
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<tr>
<td><strong>2. CARE &amp; DEVELOPMENT</strong></td>
<td>Evaluations will always consider the child’s age, stage of development, additional learning needs and the child’s starting point, as well as the type of service they attend.</td>
<td>This is not a definitive list but provides examples of the positive impact providers/practitioners have on good outcomes for children. Providers/practitioners include child minders and those employed to work directly with children.</td>
</tr>
</tbody>
</table>
| **2.1 How well do providers/practitioners keep children safe and healthy?** | Inspectors will make a judgement about how well the service’s policies and procedures for safeguarding and promoting children’s well-being are implemented. These include:  
   - child protection policy  
   - health and safety including food hygiene and provision for infection control  
   - fire safety  
   - promote healthy life styles  
   - safe administration of medication  
   - supporting children with medical conditions  
   - administering first aid  
   - safety on outings and visits  
   - internet safety  
   - bullying  
   - the management of children’s behaviour | • Providers/practitioners ensure that all practitioners fully understand and implement the policies and procedures for the service provided  
• Providers/practitioners ensure that safeguarding has a high priority, it underpins all practice and they have a good understanding of safeguarding in its wider sense  
• Providers/practitioners ensure that everyone understands their roles and responsibilities with regards to safeguarding, promoting healthy lifestyles, personal care, personal safety and relationships  
• Providers/practitioners apply the principles of the Infection Control Audit Tool if applicable to their service  
• The service implements best practice in relationship to healthy eating/lifestyle programmes well to improve outcomes for children  
• Providers/practitioners ensure children are physically active daily | Articles 3, 6, 8  
14, 16, 19 – 24,  
28-31, 33, 34,  
36, 39 |
Including physical intervention and restraint.

**Child protection**

In considering how effective procedures for child protection are, inspectors should evaluate whether risks to children are identified; the signs and symptoms of abuse are recognised and understood and whether the service’s child protection policy is implemented correctly.

- Providers/practitioners provide children with clear guidelines and boundaries around use of ICT, DVDs etc and older children contribute to policies and procedures that ensure their safety.
- There is open discussion with older children about personal safety, privacy and healthy relationships.

<table>
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<tr>
<th>2.2 How well do providers/practitioners manage interactions?</th>
<th>Inspectors should consider whether:</th>
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<tbody>
<tr>
<td>- practitioners work in line with the service’s behaviour management policy</td>
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<tr>
<td>- they are consistent in their approach, having regard to individual children, so that there is no confusion in the child’s mind as to what is/is not acceptable</td>
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<tr>
<td>- they set realistic boundaries and use appropriate sanctions having regards to the child’s stage of development</td>
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<tr>
<td>- they encourage older</td>
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</tbody>
</table>

- Providers/practitioners understand child development, how this impacts on children’s behaviour and they are role models of good behaviour themselves.
- Providers/practitioners apply agreed procedures to promote good behaviour and manage challenging behaviour consistently. The behaviour management lead is experienced for the age group cared for and is known to other practitioners.
- Providers/practitioners have attended behaviour management training for the age group they are caring for and use agreed strategies to manage unwanted behaviour well.
- Providers/practitioners promote positive behaviour well through celebrating good

Articles 3, 6, 8, 14, 16, 19 – 24, 28-31, 33, 34, 36, 39

June 2016
children to take responsibility for their own behaviour
- they model good behaviour.

behaviour without negatively impacting on others
- Providers/practitioners challenge and respond appropriately to bullying, discrimination, racism and gender stereotyping
- Providers/practitioners are approachable and sensitive to the needs and experiences of individual children; they are consistent and fair in their approach and promote honesty and a sense of right and wrong
- Providers/practitioners make their expectations of standards of behaviour clear and ensure children have enough information about what is expected of them
- Providers/practitioners listen to and respect children’s views, opinions and requests and there is an ethos of open discussion. They value child participation, ensure it is not tokenistic by acting on what children say, negotiating or making children aware of the reason for not doing something.
- Providers/practitioners encourage all children to co-operate, share, understand accepted rules of behaviour, how to relate to others, contribute to decision making and become self-disciplined
- Parents and older children are made aware of any significant behavioural issues and they work together to implement strategies to manage unwanted behaviour
- Providers/practitioners do not hurry children. They act as mediators and/or facilitators and
### 2.3 How well do providers/practitioners promote children’s development and meet their individual needs?

Inspectors should evaluate how well providers/practitioners:

- provide a nurturing and caring atmosphere/environment and provide responsive care
- know, understand and meet individual needs and abilities
- promote equality and diversity and treat all children with dignity and respect
- promote the development of all children by planning for a good variety of play, learning, recreational and leisure opportunities
- implement the principles of the Foundation Phase for children aged 3-7 years old.
- track children’s progress and use information and observations to plan for the next steps in their play and learning. Not applicable to children over 8 years old
- ensure that older children can determine and control

Providers/practitioners are able to intervene appropriately during disputes to prevent harm and avoid disrupting children’s play unnecessarily. They also set ground rules for behaviour in partnership with older children.

- Providers/practitioners are caring, nurturing and responsive to individual children’s needs. They value the children’s home backgrounds and encourage children to express their individuality
- Providers/practitioners promote children’s rights well and understand their responsibilities under the UNCRC
- Providers/practitioners promote tolerance, equality and diversity well; and encourage children’s curiosity about their own and other people’s lives and beliefs
- Providers/practitioners are confident and relaxed; they have up to date knowledge of child development across the age range of children they are caring for
- Providers/practitioners have high expectations for children’s learning; promote the children’s confidence and self esteem and provide a sense of fun and enjoyment
- Providers/practitioners ensure the daily routine provides children with stability and security. Busy, active times are interspersed with quieter times so children have time to reflect and rest
- Providers/practitioners ensure parents (and older children) are well informed about the child’s progress, achievements and

| Articles 3, 6, 8, 14, 16, 19 – 24, 28-31, 33, 34, 36, 39 | June 2016 |
the content of their play by following their own ideas and interests.

### Additional learning needs

Inspectors should consider:

- the extent to which the service offers children with additional needs access to all areas of learning
- how consistently the service conducts regular reviews of children’s progress
- whether practitioners consult parents/carers regularly
- whether grouping and support systems meet the range of needs without adversely affecting the breadth, balance and continuity of children’s play and learning
- how well the service integrates, supports and provides for children with additional needs, so that they can progress
- the quality of support for children with emotional and development. Parents are kept regularly informed about the child’s well-being
- Providers/practitioners caring for children under 8 years old plan and provide a good variety of enjoyable first hand experiences and stimulating, challenging play and learning opportunities, indoors and outside
- Providers/practitioners implement the principles of Foundation Phase curriculum for children aged 3-7 years old and provide interesting learning experiences across all areas of learning
- For children aged over 8 years old the Welsh play work principles are followed
- Providers/practitioners ensure what children can do is the starting point for their play, learning and development. They track and record appropriate observations on children’s progress and development regularly on an appropriate tool, and plan well for the next steps in children’s play and learning
- Activity planning is flexible, takes account of the type of service, children’s views and ensures a good balance between child-selected and adult led activities
- Providers/practitioners provide a language rich environment and are good language models themselves
- English medium services provide children with opportunities to use and experience the Welsh language and promote awareness of Welsh traditions and cultural celebrations
- Providers/practitioners have a good
<table>
<thead>
<tr>
<th><strong>behavioural difficulties</strong></th>
<th><strong>understanding of the importance of play and the different types of play for the different age range of children they are caring for</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- the quality of support for children with speech and language difficulties</td>
<td>- Providers/practitioners support and facilitate the play process; they recognise their own impact on the play space and the impact of play on others</td>
</tr>
<tr>
<td>- how consistently the service conducts regular reviews of children’s progress</td>
<td>- Providers/practitioners facilitates children’s recreation and leisure time well</td>
</tr>
<tr>
<td>- whether practitioners consult parents/carers regularly</td>
<td>- Providers/practitioners have an understanding of the impact of additional needs on children’s development</td>
</tr>
<tr>
<td>- the use of and contribution from specialist services such as the health, psychological and social services.</td>
<td>- Providers/practitioners ensure that they fully understand and meet the needs of children with additional needs. They recognise when babies or children may have additional needs, take appropriate action and make good use of support services</td>
</tr>
</tbody>
</table>

- Provider/practitioners use individual plans to support children who have additional needs effectively

- Regular reviews and updating of plans, ensure that children make good progress, with parents involved and kept well informed.
<table>
<thead>
<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. ENVIRONMENT</td>
<td>The environment includes indoor and outdoor play areas or any other registered play space. Inspectors will take into consideration the type of service offered when evaluating the environment and consider the quality and suitability of resources and play equipment.</td>
<td>This is not a definitive list but provides examples of how good leadership impacts on positive outcomes for children. Leaders include child minders, registered persons, responsible individuals, person in charge etc.</td>
<td></td>
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</tbody>
</table>
| 3.1 How well do providers/leaders ensure the safety of the environment? | Inspectors should evaluate whether providers/leaders:  
  - ensure children are cared for in a safe, clean and secure environment  
  - ensure unnecessary risks to children have been identified and as far as possible eliminated  
  - there is a balance between the need to promote children’s safety and protect them from harm, and the need to support children to take risks. |  
  - Providers/leaders ensure premises are safe and secure and the safety requirements in Standard 24 of the National Minimum Standards for Regulated Childcare are well implemented and they adhere to all other health and safety requirements  
  - Providers/leaders ensure that everyone is well aware of their responsibilities in relation to the safety and welfare of children; that practitioners understand health and safety requirements applicable to their service and follow the service’s policies and procedures  
  - Providers/leaders ensure practitioners supervise children well and understand the difference between acceptable and unacceptable risk for the age group of children they are working with  
  - Providers/leaders ensure the cleaning routines reflect good hygiene practice and effective infection control  
  - Providers/leaders ensure that effective risk | Articles 2, 33, 35 |
assessments are comprehensive, regularly undertaken, reviewed and acted upon to ensure children’s safety. This is communicated well to those using or working at the service.

- Providers/leaders ensure there are good systems in place to ensure regular maintenance and safety checks. Hazards are quickly identified and addressed and safety records are kept up to date.
- Providers/leaders ensure that clear information is available to everyone about how emergencies will be dealt with at the service.

<table>
<thead>
<tr>
<th>3.2 How well do providers/leaders ensure the suitability of the environment?</th>
<th>Inspectors should evaluate whether providers/leaders:</th>
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<tbody>
<tr>
<td></td>
<td>• ensure the premises and any outside play areas are secure, welcoming, friendly and provide a rich environment for play and learning</td>
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<tr>
<td></td>
<td>• there is sufficient space and facilities to meet the needs of children</td>
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<td></td>
<td>• the layout and design of the environment promotes children’s independence and it is considered from the child’s perspective</td>
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<td></td>
<td>• the premises are well maintained and decorated</td>
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<td></td>
<td>• there are suitable facilities for staff and for confidential conversations</td>
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<td></td>
<td>• play/recreational spaces for older children offer suitable challenges, risks and opportunities to</td>
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<td>Providers/leaders ensure children are provided with sufficient indoor play space as required by the National Minimum Standards for Regulated Childcare for the type of service provided</td>
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<td></td>
<td>• Providers/leaders ensure that use of the outdoor play space is given a high priority and is regularly utilised in all services</td>
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<td></td>
<td>• Providers/leaders ensure that all children are cared for in a supportive, comfortable, stimulating environment which considers the children’s religious, cultural and language needs</td>
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<td>• Providers/leaders ensure the environment is used flexibly and creates a good sense of security and belonging</td>
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<td></td>
<td>• Providers/leaders ensure the whole environment provides for a wide range of play opportunities suitable for the age range cared for</td>
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<td></td>
<td>• Providers/leaders ensure that the indoor environment is well decorated, child centred, warm, welcoming and inclusive with sufficient facilities that enhance the children’s well-being</td>
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<td></td>
<td>Articles 2, 33, 35</td>
</tr>
<tr>
<td>3.3 How well do providers/leaders ensure the quality of resources and equipment?</td>
<td>Inspectors should evaluate whether providers/leaders:</td>
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<tr>
<td></td>
<td>• children have access to furniture, equipment, toys and materials that are appropriate and suitable for their needs</td>
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<td></td>
<td>• resources are of a suitable design and condition, well maintained and conform to relevant safety standards</td>
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<td></td>
<td>• resources are clean and their maintenance complies with infection control principles</td>
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<td></td>
<td>• toys and play materials promote cultural awareness and equal opportunities</td>
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<td></td>
<td>• Providers/leaders ensure the environment is well planned to reflect the needs and interests of the group of children using the space</td>
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<td></td>
<td>• Providers/leaders ensure that children can explore their environment freely and are supported to take positive risks and make decisions</td>
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<tr>
<td></td>
<td>• Providers/leaders ensure the environment is adapted or modified to ensure that all children can access the provision regardless of their needs or abilities.</td>
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Articles 2, 33, 35
| • the outside area provides appropriate play and learning opportunities |
| • sufficient child sized furniture, toys, resources etc are available for the size of the group |
| • the use of a wide range of sustainable materials is promoted. |

<p>| accessible to children through good storage and labelling (English and Welsh). They are challenging, stimulating, and allow children to follow their interests |
| • Providers/leaders ensure resources, toys and displays reflect the wider society and promote equality well |
| • Providers/leaders ensure that access to toys, electronic games, DVDs and the internet is well monitored to ensure they are appropriate to the children’s age and stage of development |
| • Providers/leaders ensure suitable storage facilities are available for indoor and outdoor resources so they are kept safe, clean and well maintained. |</p>
<table>
<thead>
<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. LEADERSHIP AND MANAGEMENT</td>
<td>Inspectors will consider the type and nature of the service provided, including the arrangements to support the engagement of all staff in continuing their professional development, including participation in whole-service learning experiences.</td>
<td>This is not a definitive list but provides examples of how good leadership impacts on positive outcomes for children. Leaders include child minders, registered persons, responsible individuals, person in charge etc.</td>
<td>Articles 1-3, 9, 15, 18, 26, 42</td>
</tr>
<tr>
<td>4.1 How effective is leadership?</td>
<td>Inspectors should evaluate whether providers/leaders:</td>
<td>Providers/leaders have a sense of purpose that promotes and sustains improvement and good outcomes for children of all ages</td>
<td>Articles 1-3, 9, 15, 18, 26, 42</td>
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<td></td>
<td>• comply with all regulations and meet the National Minimum Standards</td>
<td>They have a clear vision for the service that they share effectively with others</td>
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<td></td>
<td>• have a clear statement of purpose that provides an accurate picture of the service</td>
<td>They maintain and share an up-to-date statement of purpose that provides an accurate picture of what the service offers</td>
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<td></td>
<td>• communicate their vision for the service well</td>
<td>Providers/leaders ensure that the service complies with all relevant regulations and regularly exceed the National Minimum Standards</td>
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<td></td>
<td>• promote safe practices and a culture of safety</td>
<td>The providers/leaders ensure that effective policies are in place and that these are fully implemented in practice</td>
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<td></td>
<td>• actively support and challenge everyone to do their best</td>
<td>Providers/leaders communicate high expectations for securing improvement and challenge practitioners positively to good effect</td>
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<td></td>
<td>• set high expectations</td>
<td>They build teams effectively and challenge poor performance robustly</td>
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<tr>
<td></td>
<td>• develop a sense of purpose that promotes and sustains improvements</td>
<td>Relationships with stakeholders are positive and contribute significantly to a sense of community</td>
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<td></td>
<td>• share their values and norms about learning, behaviour, relationships and continuous professional development</td>
<td>Providers/leaders have a sound understanding of current best practice relevant to the children in their</td>
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<td></td>
<td>set clear aims and policies that are focused on children’s needs and are understood and implemented by all practitioners and made available to parents</td>
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<td>monitor and evaluate outcomes for children</td>
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<td></td>
<td>keep the registered person(s)/responsible individual well informed about the service’s progress</td>
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<td></td>
<td>create a positive ethos whereby children and practitioner feel valued.</td>
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<td></td>
<td>Providers/leaders have a sound understanding of their responsibilities to promote the Welsh language and can demonstrate the “active offer” is implemented.</td>
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<td></td>
<td>care and effectively promote this</td>
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<tr>
<td>4.2 How effective is self-evaluation and planning for improvement?</td>
<td>Inspectors should consider whether the service’s self-evaluation process:</td>
<td>Providers/leaders and practitioners know their service well and promote a positive culture of continuous self-evaluation which is embedded in daily practice</td>
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</table>
|   | - draws on first-hand evidence of the quality of care provided  
- involves all practitioner in assessing outcomes and their own performance, such as reflecting on what they do on a daily basis  
- takes account of the views of practitioner, parents/carers, children, the management committee and other stakeholders applicable to the service and a report is produced and shared with contributors  
- draws upon advice and feedback by external agencies, where appropriate  
- prioritises the matters they wish to improve  
- implements sound strategies likely to bring about the desired improvements  
- takes account of whether concerns/complaints have been appropriately addressed  
- results in improvement in the quality of care, play and learning provided. | - There are effective systems for regularly gaining the views of children and for providing them with feedback  
- Strengths and areas for development are recognised and action is taken to maintain and improve practice and implement change  
- Providers/leaders/practitioners are open to new ideas; are willing to try out different ways of working and to share their knowledge  
- Providers/leaders are reflective and seek feedback on their own practice and use this information positively to benefit the service  
- The views of children, their parents/carers, staff and other interested partners are regularly and effectively sought. These views are considered as part of the on-going self-evaluation process  
- The annual quality of care review report clearly shows who has contributed to the review, any issues raised, how improvements will be made and how this will benefit the children. There are no unresolved non-compliance issues from the last CSSIW inspection and the service has addressed all recommendations made by other professional bodies  
- Providers/leaders use relevant information about the service well to achieve progress against the service’s priorities  
- Lessons are learnt and appropriate action is taken in relation to any concerns or complaints made about the service  
- Providers/leaders ensure that children understand the process for raising concerns/complaints and are enabled to do so in a safe environment. |

Articles 1-3, 9, 15, 18, 26, 42
### 4.3 How effective is the management of practitioners/staff and other resources?

Inspectors should evaluate how well providers/leaders:

- follow safe, robust and timely recruitment processes
- define roles and responsibilities
- have an effective system of practitioners’ supervision and appraisal that leads to agreed targets
- ensure there are sufficient qualified and experienced practitioners for the range of children cared for and they are deployed effectively
- develop contingency plans to cover staff absences away from the children
- ensure that practitioners understand and fulfil their roles in relation to the service’s aims
- manage their own time and prioritise their own activities responsively
- communicate high expectations to those they manage
- agree and achieve challenging and realistic targets for themselves and others
- secure appropriate outcomes for children overall.

Providers/leaders ensure that safeguarding children is at the heart of the practitioner recruitment process and they have systems in place to ensure fitness checks are updated as necessary
- The recruitment process ensures that the most appropriate people are recruited for their roles
- Practitioner’s ability to speak Welsh is assessed and promoted
- Leaders ensure that practitioner recruitment is timely and well managed to meet the needs of the whole age group
- All practitioners have clearly defined roles and responsibilities
- Providers/leaders implement an effective induction procedure for all volunteers and practitioners, and there is a performance management process/training plan for everyone employed at the service
- Providers/leaders have high expectations of themselves and others, set realistic targets, are good role models and motivate practitioners to excel
- Providers/leaders ensure that practitioners are deployed effectively to ensure continuity of care for children and there are sufficient practitioners with appropriate skills to meet the children’s needs
- There are effective arrangements in place for practitioner absences (both planned and unplanned) which ensure there is no impact on the quality of care children receive
- Practitioners’ supervision and appraisals are meaningful. They identify training which is needed or which the practitioner wishes to undertake

Articles 1-3, 9, 15, 18, 26, 42
### 4.4 How effective are partnerships?

Inspectors should consider whether the service is clear about its role and responsibilities to establish trust and clear communication between partners.

Inspectors should evaluate how well providers/leaders:

- work with parents to identify the individual needs and preferences of their child before and during their time at the service
- works with parents to improve their child’s well-being and learning on a day-to-day basis
- keeps parents informed about their child’s well-being, care, development and progress
- involves parents in making decisions about their child’s progress and well-being
- provides information to parents about the service’s policies and procedures
- develop links with partners in the community.

- There is a strong culture of continuous professional development which is modelled by leaders.
- Providers/leaders work with partners to improve children’s learning and well-being and take active steps to involve parents and carers in the service
- They provide parents with relevant information to make informed choices about the care of their child
- They establish trust and clear communication with parents through inclusive practice
- The service keeps parents well informed about all aspects of its work and encourages parents to be active partners in their children’s well-being, development and learning
- Providers/leaders consider and respond to feedback, concerns and complaints in a timely manner
- The service has good links with the community and positive relationships with stakeholders to enhance the work of the service and promote good outcomes for children
- Providers/leaders/practitioners work well with relevant agencies to support children, including those with additional needs
- Where there are concerns about children progress or development there are clear steps and protocols in place for sharing information. There is evidence that these are followed consistently and that children have benefited from the action taken.

Articles 1-3, 9, 15, 18, 26, 42
## Annex B – Open access play inspection framework

<table>
<thead>
<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
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</thead>
<tbody>
<tr>
<td>1.WELLBEING</td>
<td>Evaluations will always consider the child’s age, stage of development, additional learning needs and the child’s starting point, as well as the type of service they attend.</td>
<td>This is not a definitive list but provides examples of positive outcomes for children.</td>
<td></td>
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</tbody>
</table>
| 1.1 To what extent do children have a voice? | Inspectors should evaluate whether children:  
  - make choices and decisions  
  - are listened to and all attempts at communication are valued  
  - are encouraged to speak and express themselves  
  - express their views and know that their ideas will be listened to  
  - contribute to ideas for themes and topics.  
  - choose how they play and who they play with |  
  - Nearly all children direct their own play  
  - Nearly all children respond positively to play and there is mutual respect other children  
  - Nearly all children speak or express themselves well throughout the session and communicate their needs in a variety of different ways  
  - Nearly all children are confident to communicate because they know their home language is given due consideration  
  - Nearly all children that need a service through the Welsh language receive one  
  - Nearly all children participate well and are encouraged to express their opinions and contribute to ideas about how the service is run  
  - Nearly all children understand the process for | Articles 2, 12, 23, 29, 31 |
| 1.2 To what extent do children feel safe, happy and valued? | Inspectors should evaluate whether children:  
- feel secure, happy and comfortable and relaxed  
- feel valued and their rights are respected  
- are forming friendships  
- know whom to talk to if they are worried  
- are unhappy or worried about something  
- are confident that their feelings, likes, dislikes and concerns will be taken into account. |  
- Nearly all children appear to be happy in the service  
- Nearly all children show independence and do not depend on authority or control from adults  
- Nearly all children are self-assured  
- Nearly all children demonstrate regard for others  
- Nearly all children demonstrate trust in practitioners  
- Nearly all children are energetic and moving around or are absorbed and involved in play  
- Nearly all children are at ease and do not show signs of embarrassment, awkwardness, constraint or formality  
- Nearly all children feel valued and are confident that their feelings, likes, dislikes and concerns are taken into consideration or they are negotiated if they cannot be met | Articles 2, 12, 23, 29, 31 |
| 1.3 How well do children interact? | Inspectors should evaluate whether children: | • Most children engage in a range of play types  
• Nearly all children decide what is appropriate behaviour  
• Nearly all children challenge themselves in their own way  
• Nearly all children explore their own values  
• Most children are becoming sensitive to the emotions of others; they are becoming self disciplined and accept differences of race, gender, abilities, age and religions/cultures | Articles 2, 12, 23, 29, 31 |
|----------------------------------|-----------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------|
| • are resilient and can cope with uncertainty  
• children are supported to understand the feelings and emotions of others  
• children are supported to manage their behaviour and develop relationships with others  
• children are supported to decide and comply with what is socially acceptable behaviour | | | |
| 1.4 To what extent do children enjoy their play, learning and recreation? | Inspectors should evaluate whether children: | • Most children develop positive attitudes to new experiences, and maintain interest in independent tasks  
• Most children are able to explore their environment freely and safely  
• Nearly all children create spaces in which they can play | Articles 2, 12, 23, 29, 31 |
| • are supported to engage in freely chosen self-directed play  
• gain a sense of achievement | | | |
| from what they do | Nearly all children have access to a range of play resources
- Nearly all children have the opportunity to play and interact with the natural environment
- Nearly all children have extended periods of child initiated, uninterrupted play as well as opportunities to engage adults in their play
- Nearly all children can influence the activities they undertake.

**1.5 How well do children develop and become independent?**

Inspectors should evaluate how well children:
- develop confidence and independence
- are motivated and can follow personal interests.
- demonstrate characteristics of behaviour that contributes to building their resilience

- Nearly all children explore their own values
- Nearly all children are given independence to play uninterrupted by adults
- Nearly all children make good progress, are confident to try new things, take risks and gain a sense of pride from their achievements
- Nearly all children cope well with challenging experiences

Articles 2, 12, 23, 29
<table>
<thead>
<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLES</th>
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<tbody>
<tr>
<td>2. CARE &amp; DEVELOPMENT</td>
<td>Inspectors will take into consideration the level of qualifications and experience of practitioners when making evaluations.</td>
<td>This is not a definitive list but provides examples of the positive impact providers/practitioners have on good outcomes for children. Providers/practitioners of open access play include those employed to work directly with children in order to support and facilitate the play process in line with the playwork principles.</td>
<td>Articles 3, 6, 8, 14, 16, 19 – 24, 28-31, 33, 34, 36, 39</td>
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</table>
| 2.1 How well do providers/practitioners keep children safe and healthy? | Inspectors will make a judgement about how well the service’s policies and procedures for safeguarding and promoting children’s well-being are implemented. These include:  
  - child protection policy  
  - health and safety including food hygiene and provision for infection control  
  - risk-benefit assessment of children’s play  
  - fire safety  
  - promote healthy life styles  
  - safe administration of medication  
  - supporting children with medical conditions | • Providers/practitioners understand how risk-benefit assessment is applied in a service  
• Providers/practitioners understand and implement the policies and procedures for the service provided  
• Practitioners have positive interactions with children and talk with them, when prompted by children, about issues of safety, bullying, health and relationships  
• Practitioners use reflective practice to support their understanding of children’s behaviour and develop strategies to manage it  
• Practitioners apply agreed procedures for children’s medical requirements this may include administering medication or working with parents to ensure that medical or personal care requirements are met  
• Practitioners understand children’s individual requirements to support their inclusion in the | |
• administering first aid
• safety on outings and visits
• internet safety
• bullying
• the management of children’s behaviour including physical intervention and restraint.

Child protection

In considering how effective procedures for child protection are, inspectors should evaluate whether risks to children are identified; the signs and symptoms of abuse are recognised and understood and whether the service’s child protection policy is implemented correctly.

2.2 How well do providers/practitioners manage interactions?

Inspectors should consider whether practitioners:
• engage with relevant community groups and individuals to promote and develop the service

Provider/practitioners have an understanding of the needs of the community, this could be informed by experience, community audits or discussion with parents, children and other professionals
• Practitioners show that they are developing mutually respectful relationships with children,

Articles 3, 6, 8, 14, 16, 19 – 24, 28-31, 33, 34, 36, 39
| Model behaviour appropriate to the societal and cultural context in which they are working. | Practitioners have an understanding of what is considered appropriate behaviour in the societal and cultural environment they are working in. |
| Work in line with the service's behaviour management policy. | Practitioners use reflective practice to support their understanding of children's behaviour and develop strategies to manage it. |
| Are consistent in their approach to children's behaviour. Having regard to the individual children, so that there is no confusion in the child's mind as to what is acceptable. | Practitioners show a consistent understanding across the staff team of agreed boundaries and strategies for dealing with situations they may find challenging. |
| Set realistic boundaries with children. | Practitioners have attended behaviour management training for the age group they are caring for and use agreed strategies to manage unwanted behaviour. |
| Encourage older children to take responsibility for their own behaviour. | Practitioners challenge and respond appropriately to bullying, discrimination, racism and gender stereotyping. |
| Practitioners listen to and respect children's views, opinions and promote/encourage participation. | Practitioners act as mediators and/or facilitators and are able to intervene appropriately during disputes to prevent harm and avoid disrupting children's play. |
unnecessarily. They also set ground rules for behaviour in partnership with older children.

| 2.3 How well do providers/practitioners promote children’s development and meet their individual needs? | Inspectors should evaluate how well providers/practitioners: | • Practitioners choose an appropriate intervention style that allows children to extend their own play  
• Provider/practitioners promote children’s rights well and understand their responsibilities under the UNCRC  
• Practitioners are conscious of the level of support required to enable children to control the content and intent of their play  
• Procedures understand and provide for children’s medical requirements this may include administering medication or working with parents to ensure that medical or personal care requirements are met |

|  | • promote equality and diversity and treat all children with dignity and respect  
• promote the development of children by facilitating play  
• ensure that children can determine and control the content of their play by following their own ideas and interests | Articles 3, 6, 8, 14, 16, 19 – 24, 28-31, 33, 34, 36, 39 |
<table>
<thead>
<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. ENVIRONMENT</td>
<td>The environment includes indoor and outdoor play areas or any other registered play space. Inspectors will take into consideration the type of service offered when evaluating the environment and consider the quality and suitability of resources and play equipment.</td>
<td>This is not a definitive list but provides examples of how good leadership impacts on positive outcomes for children. Leaders include registered persons, responsible individuals, person in charge etc.</td>
<td></td>
</tr>
<tr>
<td>3.1 How well do providers/leaders ensure the safety</td>
<td>Inspectors should evaluate whether providers/leaders:</td>
<td>• Providers / practitioners understand how to apply risk-benefit assessment and the</td>
<td>Articles 2, 33, 35</td>
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</table>
| 3.2 How well do providers/leaders ensure the suitability of the environment? | Inspectors should evaluate whether providers/leaders:  
- provide a quality play environment for play  
- there is sufficient space and facilities to meet the needs of children | Practitioners ensure that children have access to:  
- other children - of different ages and abilities with a choice to play alone or with others, to negotiate, co-operate, fall out, and resolve conflict.  
- The natural world - weather, trees, plants, insects, animals, mud. | Articles 2, 33, 35 |
|---|---|---|---|
| of the environment? | • implement a risk management approach based on risk-benefit assessment this should be known and understood by all staff  
• ensure unnecessary risks to children have been identified and as far as possible eliminated  
• there is a balance between the need to promote children’s safety and protect them from harm, and the need to support children to take risks. | rationale for doing so  
• Providers/practitioners use accident and incident records to support reflective practice and inform how risks are managed  
• Providers/ practitioners use their risk management procedures to ensure that unnecessary hazards in the service are identified and controlled  
• Providers/leaders ensure that clear information is available to everyone about how emergencies will be dealt with at the open access play service. | |
- the layout and design of the environment promotes children’s independence and it is considered from the child’s perspective
- there are suitable arrangements for staff and for confidential conversations
- play/recreational spaces for all children offer suitable challenges, risks and opportunities to experiment.

- Loose parts - natural and man made materials that can be manipulated, moved and adapted, built and demolished.
- The four elements - earth, air, fire and water.
- Challenge and uncertainty - graduated opportunities for risk taking; both on a physical and emotional level.
- Changing identity - role play and dressing up.
- Movement - running, jumping, climbing, balancing, rolling, swinging, sliding and spinning.
- Rough and tumble - play fighting.
- The senses - sounds, tastes, textures, smells and sights.
- Practitioners know and understand arrangements for staff breaks and having confidential conversations.

<table>
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<tr>
<th>3.3 How well do providers/leaders ensure the quality of resources and equipment?</th>
<th>Inspectors should evaluate whether providers/leaders:</th>
<th>Practitioners understand procedures for managing resources</th>
<th>Articles 2, 33, 35</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>• provide children with access to play resources that are appropriate and suitable for their needs</td>
<td>• Practitioners provide a wide variety of loose parts and play resources</td>
<td></td>
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<tr>
<td></td>
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<td>• Practitioners understand risk management procedures that may apply to specific</td>
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• provide resources of a suitable design and condition that are well maintained and conform to relevant safety standards, where applicable
• promote the use of wide range of sustainable/recyclable materials
• apply evaluations that always consider the child’s age, stage of development, additional learning needs and the child’s starting point, as well as the type of service they attend.
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<tr>
<th>THEME</th>
<th>WHAT IS EVALUATED</th>
<th>EXAMPLES OF WHAT GOOD MAY LOOK LIKE</th>
<th>UNCRC ARTICLE</th>
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<tr>
<td>4. LEADERSHIP AND MANAGEMENT</td>
<td>Inspectors will consider the type and nature of the service provided, including the arrangements to support the engagement of all staff in continuing their professional development, including participation in whole-service learning experiences.</td>
<td>This is not a definitive list but provides examples of how good leadership impacts on positive outcomes for children. Leaders include child minders, registered persons, responsible individuals, person in charge etc.</td>
<td>Articles 1-3, 9, 15, 18, 26, 42</td>
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</table>
| 4.1 How effective is leadership? | Inspectors should evaluate whether providers/leaders:  
- comply with all Welsh Government regulations and meet the National Minimum Standards  
- promote and support reflective practice within the staff team to improve performance  
- promote good playwork practice in line with the playwork principles  
- monitor and evaluate the effectiveness of the service  
- have a clear statement of purpose that provides an accurate picture of the service | • Providers/leaders value and apply reflective practice in their service  
• Providers/leaders ensure time is made for reflective practice through; team meetings, session de-briefs, 1 to 1 supervision, staff training and mentoring.  
• Providers/leaders ensure that staff understand and work to the playwork principles  
• The statement of purpose is used to promote the service to parents, children and the community  
• Providers/leaders know and understand the progress being made by the service  
• Providers/leaders have a clear vision for the service that they share effectively with others  
• Providers/leaders maintain and share an up-to-date statement of purpose that provides an accurate picture of what the service offers  
• Providers/leaders ensure that the service complies with all relevant regulations and regularly exceed the National Minimum Standards | |
| • communicate the nature of the service effectively to parents and the wider community | • Providers/leaders ensure that effective policies are in place and that these are fully implemented in practice |
| • set clear aims and policies that are focused on children’s needs and are understood and implemented by all practitioners and made available to parents | • Providers/leaders communicate high expectations for securing improvement and challenge practitioners positively to good effect |
| • keep the registered person(s)/responsible individual well informed about the service’s progress | • Providers/leaders ensure they build teams effectively and challenge poor performance robustly |
| • create a positive environment whereby children and practitioners feel valued | • Providers/leaders ensure that relationships with partners are positive and contribute significantly to a sense of community |
| • communicate their vision for the service well | • Providers/leaders have a sound understanding of current best practice relevant to the children in their care and effectively promote this |
| • promote safe practices and a culture of safety | • Providers/leaders have a sound understanding of their responsibilities under the Welsh Language Standards and the Welsh Government’s strategic framework More Than Just Words. They can demonstrate the “active offer” is well implemented. |
| • set clear aims and policies |
| 4.2 How effective is self-evaluation and planning for improvement? | Inspectors should consider whether the service’s self-evaluation process:  
- Show a clear link between reflective practice and maintaining and improving the quality of the service  
- Involves all practitioners in assessing outcomes and their own performance, such as reflecting on what they do on a daily basis  
- Takes account of the views of practitioners, parents/carers, children, the management committee and other partners |  
- There is a process for gathering and recording feedback from children, parents and external agencies. This is recorded and used to plan the service.  
- Leaders make use of sector specific self-assessment quality frameworks  
- Providers/leaders and practitioners know their service well and promote a positive culture of continuous self-evaluation which is embedded in daily practice  
- Strengths and areas for development are recognised and action is taken to maintain and improve practice and implement change  
- Providers/leaders/practitioners are open to new ideas; are willing to try out different ways of working and to share their knowledge with | Articles 1-3, 9, 15, 18, 26, 42 |
<table>
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<tr>
<th>applicable to the service and a report is produced and shared with contributors</th>
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<td>draws upon advice and feedback by external agencies, where appropriate</td>
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<td>prioritises the matters they wish to improve</td>
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<td>takes account of whether concerns/complaints have been appropriately addressed</td>
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<tr>
<td>contributes to plans to maintain and improve the quality of the service.</td>
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<th>others</th>
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<tr>
<td>Providers/leaders are reflective and seek feedback on their own practice and use this information positively to benefit the service.</td>
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<tr>
<td>Providers/leaders ensure the views of children, their parents/carers, staff and other interested partners are regularly and effectively sought. These views are considered as part of the on-going self evaluation process.</td>
</tr>
<tr>
<td>Providers/leaders ensure the annual quality of care review report clearly shows who has contributed to the review, any issues raised, how improvements will be made and how this will benefit the children. There are no unresolved non-compliance or practice recommendations from the last CSSIW inspection and the service has addressed all recommendations or non-compliance issues raised by other professional bodies.</td>
</tr>
<tr>
<td>Providers/leaders use relevant information about the service well to achieve progress against the service’s priorities.</td>
</tr>
<tr>
<td>Providers/leaders ensure that lessons are learnt and prompt action is taken in relation to any concerns or complaints made about the service.</td>
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<tr>
<td>Providers/leaders ensure that children understand the process for raising concerns/complaints and are enabled to do so.</td>
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<td><strong>4.3 How effective is the management of practitioners/staff and other resources?</strong></td>
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<td>4.4 How effective are partnerships?</td>
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<tr>
<td>Articles 1-3, 9, 15, 18, 26, 42</td>
</tr>
</tbody>
</table>
Reference list of key support documents

Day care, child minders and elements of play

- Children and Families (Wales) Measure 2010

- Child Minding and Day Care (Wales) Regulations 2010

- National Minimum Standards for Regulated Child Care

- United Nations Convention on the Rights of the Child (UNCRC)

- Supervising and Appraising Well - A guide to effective supervision and appraisal

- Developmentally appropriate practice for 0-3 year olds

- Flying Start Transitions Guidance

- Flying Start Quality Child Care

- Foundation Phase Framework - (Revised 2015)

- Foundation Phase Profile Handbook

- The Playwork Principles (Skills Active 2005)
  [http://www.playwales.org.uk/eng/playworkprinciples](http://www.playwales.org.uk/eng/playworkprinciples)

- Importance of Play and types of Play
  [http://www.playwales.org.uk/eng/informationsheets](http://www.playwales.org.uk/eng/informationsheets)

- Children’s Play and Leisure – Promoting a Balanced Approach (Health and Safety Executive 2012)

- All Wales Child Protection Procedures

- Safeguarding

- Working Together under the Children Act 2004
• Welsh Government’s HWB On-Line Safety http://hwb.wales.gov.uk/pages/eSafety-Index
• More than Just Words and the Active Offer http://gov.wales/topics/health/publications/health/guidance/words/?lang=en
• The Healthy and Sustainable Pre-School Scheme http://gov.wales/topics/health/publications/health/guidance/scheme/?lang=en
• Welsh Government Designed to Smile Scheme http://gov.wales/topics/health/cmo/professionals/dental/smile/?lang=en
• Welsh Government Change for Life http://change4lifewales.org.uk/?lang=en
• Welsh Government Food and Health Guidelines for Early Years and Child Care Settings http://gov.wales/docs/phhs/publications/foodandhealth/090414guidelinesen.pdf

Annex B (continued)

Open access play

• Wales – A Play Friendly Country (Welsh Government 2014)
- CSSIW Ratios Tool
- Importance of Play and types of Play [http://www.playwales.org.uk/eng/informationsheets](http://www.playwales.org.uk/eng/informationsheets)
- The First Claim, Play Wales [http://www.playwales.org.uk/eng/firstclaim](http://www.playwales.org.uk/eng/firstclaim)
- Importance of Play and types of Play [http://www.playwales.org.uk/eng/informationsheets](http://www.playwales.org.uk/eng/informationsheets)
Annex C: Inspection report template

Childcare Inspection Report on

Xxxxxxx
Xxxxxxx
Xxxxxxx
Xxxxxxx

Date of Publication - xx/xx/xx
EXAMPLE 1: Sessional day care service

Description of the service

Brief summary of where the service is, who runs it, the types of care provided, age ranges etc.

Example Tots is a playgroup based at Tumble Village Hall. It is run by a local voluntary association. It opens three mornings a week, from 8am until 12.30pm. The playgroup offers 30 places for children aged 2-4 which includes 15 places for children funded by Flying Start.

Summary of our findings

Narrative which covers:

1) overall assessment;
2) the improvement journey;
3) requirements and recommendations going ahead.

We found that children attending Example Tots are happy and look forward to attending. They particularly like using the new outdoor play area. Children clearly benefit from attending and there was evidence that children are making progress as a result of the activities on offer. Staff are kind and respond quickly to children’s needs. Parents told us that they feel their children are safe and well cared for.

The playgroup has made a number of improvements since the last inspection, buying new equipment and toys and encouraging more “free play”:

We noted that some children had difficulty in finding the toilets and we recommended child friendly signs were used. We also noted that there was no record of children’s sleep routines on file and recommended this was done so that children who needed rest in the middle of the morning could have a break.

For each theme

1. Well-being
2. Care and Development
3. Leadership and Management
4. Environment

We put a short overall summary at the top including a narrative judgement then our individual findings/evidence/judgement for the component areas below.
Summary (e.g. for environment)

Example Tots provides a good, stimulating environment in which children are kept safe. In particular children enjoy using the new outdoor equipment and the sheltered area means they can play outside even if it is raining.

Our findings

The main hall at Example Tots is light and airy and provides plenty of space for children to move between activities. We saw children using the different activity tables etc.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Areas of non compliance identified at this inspection

None

5.3 Recommendations for improvement

1) Child friendly signs are used to help children find the toilets and
2) Sleep routines are always recorded in children’s files.

6. How we undertook this inspection

What type of inspection, when and how long we visited the service, numbers of people we spoke to, what we did, surveys number of surveys we received and records we reviewed (as bullet points).

This was a full inspection undertaken as part of our normal schedule of inspections.

- One inspector undertook an unannounced visit to the service for five hours; we observed the children and the care they received at Example Tots at different times in the morning using our “SOFI” tool to capture evidence of children’s engagement and the care being provided by staff;
- we spoke to a number of children during the morning, three parents and two members of staff. In addition we completed two telephone interviews with parents;
- we received five questionnaires from parents and four from staff and
• we looked at a wide range of records. We focused on the Statement of Purpose, the quality of care review, staff training records and four children’s records.

Further information about what we do can be found on our website - www.cssiw.org.uk
EXAMPLE 2: Full day care service

Description of the service

Brief summary of where the service is, who runs it, the types of care provided, age ranges etc

Hapless Nursery is based on an industrial park in Bedwas. It is run by Mrs Jones who owns the nursery. It opens five days a week, from 8am until 6pm. The nursery offers 60 places for children aged 0-12 and provides a breakfast club, day-time nursery places and after-school activities.

Summary of our findings:

Narrative which covers:

1) overall assessment;
2) the improvement journey and
3) requirements and recommendations going ahead

We found that children attending Hapless Nursery are generally happy and look forward to attending. However, we also found children are left for long periods of time without staff support and encouragement. We observed some children who were clearly bored and under occupied. This resulted in them becoming restless. Parents told us that they feel their children are safe and but the some felt the nursery is disorganised and at times “chaotic”.

There was little evidence of improvement or investment since the last inspection although the owner of the nursery has improved fire safety checks and ensured records for staff recruitment are up to date.

We found the nursery was not compliant in respect of regulations relating to:

- Staffing levels: There were insufficient staff on duty to meet the needs of children
- First aid cover: The nursery does not ensure there was a first aider on duty at all times.

We also recommended children’s dietary preferences are recorded.

For each theme

1. Well-being
2. Care and Development
3. Leadership and Management
4. Environment

We put a short overall summary at the top including a narrative judgement then our individual findings/evidence/judgement for the component areas below.

Summary

Our findings

5. Improvements required and recommended following this inspection

5.1 Non-compliance from previous inspections

At the previous inspections we issued two non compliance notices which were outstanding at the time of this inspection was being planned.

- Fire safety: At this inspection we were satisfied the regulations were being complied with. Staff had received training and fire drills were being undertaken.
- First aid training: At this inspection we found the owner of the nursery still failed to ensure first aiders were on duty throughout the day. The service remains non compliant with regulations.

At the last inspection we notified the provider that the home was not compliant with the regulations in relation to staff recruitment. The owner has taken action and all the required staff references and checks were available when we visited. The nursery is now compliant in respect of staff recruitment.

5.2 Areas of non compliance identified at this inspection

- Staffing levels: We issued non compliance notice at this inspection in relation to staffing levels. We found that there were insufficient staff members on duty to ensure children were properly supervised.

5.3 Recommendations for improvement

- Children’s dietary preferences should be made clear in children’s files.
6. How we undertook this inspection

What type of inspection, when and how long we visited the service, numbers of people we spoke to, what we did, surveys number of surveys we received and records we reviewed (as bullet points).

This was a focused inspection undertaken following a concern from a parent about staffing levels at the nursery.

- Two inspectors undertook an unannounced visit to the service for seven hours;
- We observed the children and the care they received at Hapless Nursery at different times in the day using our “SOFI” tool to capture evidence of children’s engagement and the care being provided by staff;
- We spoke to a number of children during the day, four parents and two members of staff. In addition we completed two telephone interviews with parents. We also spoke to the local Flying Start co-ordinator;
- We received five questionnaires from parents and four from staff and
- we looked at a wide range of records. We focused on the staffing rota, complaints file, Statement of Purpose, the quality of care review, staff training and recruitment records and four children’s records.

Further information about what we do can be found on our website - www.cssiw.org.uk
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<tr>
<th>About the service</th>
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<tr>
<td><strong>Type of care provided</strong></td>
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<tr>
<td><strong>Registered Person(s)</strong></td>
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<tr>
<td><strong>Responsible Individual</strong></td>
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<td><strong>Person in charge</strong></td>
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<tr>
<td><strong>Registered maximum number of places</strong></td>
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<tr>
<td><strong>Age range of children</strong></td>
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<tr>
<td><strong>Opening hours</strong></td>
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<tr>
<td><strong>Operating language of the service</strong></td>
</tr>
<tr>
<td><strong>Date of previous CSSIW inspection</strong></td>
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<tr>
<td><strong>Dates of this inspection visit(s)</strong></td>
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<tr>
<td><strong>Is this a Flying Start service?</strong></td>
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<tr>
<td><strong>Does this service provide the Welsh language active offer?</strong></td>
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<tr>
<td><strong>Additional information:</strong></td>
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Care and Social Services Inspectorate Wales

Children and Families (Wales) Measure 2010

Child Minding and Day Care (Wales) Regulations 2010

Non Compliance Notice

This notice sets out where your service is not compliant with the regulations. You, as the registered person, are required to take action to ensure compliance is achieved in the timescales specified.

The issuing of this notice is a serious matter. Failure to achieve compliance will result in CSSIW taking action in line with its enforcement policy.

Further advice and information is available on CSSIW’s website

www.cssiw.org.uk
Annex D

Extract taken from Children and Families (Wales) Measure 2010


Section 41 Powers of entry:

(1) Any person authorised for the purposes of this subsection by the Welsh Ministers may at any reasonable time enter any premises in Wales on which child minding or day care is at any time provided.

(2) Any person authorised for the purposes of this subsection by the Welsh Ministers may at any reasonable time enter any premises in Wales if the person has reasonable cause to believe that a child is being looked after on any premises in contravention of this Part.

(3) Authorisation under subsection (1) or (2)—

(a) may be given for a particular occasion or period;

(b) may be given subject to conditions.

(4) A person exercising any power conferred by this section or section 42 must, if so required, produce some duly authenticated document showing that person's authority to do so.

Section 42 Powers of inspection:

(1) A person entering premises under section 41 may (subject to any conditions imposed under section 41(3)(b))—

(a) inspect the premises;

(b) inspect, and take copies of—

(i) any records kept by the person providing the child minding or day care, and

(ii) any other documents containing information relating to its provision;

(c) seize and remove any document or other material or thing found there which the authorised person has reasonable grounds to believe may be evidence of a failure to comply with any condition or requirement imposed by or under this Part;

(d) take measurements and photographs or make recordings;

(e) inspect any children being looked after there, and the arrangements made for their welfare;

(f) interview in private the person providing the child minding or day care;
(g) interview in private any person looking after children, or living or working, on the premises who consents to be interviewed.

(2) The power in subsection (1)(b) includes—

(a) power to require any person holding or accountable for documents or records kept on the premises to produce them, and

(b in relation to records which are kept by means of a computer, power to require the records to be produced in a form in which they are legible and can be taken away.

(3) The powers in paragraphs (b) and (c) of subsection (1) do not include power—

(a) to require a person to produce any record or document in respect of which a claim to legal professional privilege could be maintained in legal proceedings, or

(b) to take copies of such a record or document or to seize and remove it.

(4) In connection with inspecting any such documents, a person authorised for the purposes of section 41 (subject to any conditions imposed under section 41(3)(b))—

(a) may obtain access to, and inspect and check the operation of, any computer and associated apparatus or material which he or she considers is or has been in use in connection with the documents, and

(b) may require a person within subsection (5) to afford him or her such reasonable assistance as may be required for that purpose.

(5) A person is within this subsection if he or she is—

(a) the person by whom or on whose behalf the computer is or has been used, or

(b) a person having charge of, or otherwise concerned with the operation of, the computer, apparatus or material.

(6) A person entering premises under section 41 (subject to any conditions imposed under section 41(3)(b)) may require any person to afford him or her such facilities and assistance with respect to matters within the person’s control as are necessary to enable him or her to exercise powers under section 41 or this section.

(7) Any person who without reasonable excuse—

(a) obstructs a person exercising any power under section 41 or this section, or

(b) fails to comply with any requirement imposed under this section.
is guilty of an offence and liable on summary conviction to a fine not exceeding level 4 on the standard scale.