



## Inspection Report

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**Aberystwyth**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**



**Date Inspection Completed**

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## About the service

Type of care provided	Child Minder
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	
Is this a Flying Start service?	No
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

<a href="#"><u>Well-being</u></a>	<b>Good</b>
<a href="#"><u>Care and Development</u></a>	<b>Adequate</b>
<a href="#"><u>Environment</u></a>	<b>Adequate</b>
<a href="#"><u>Leadership and Management</u></a>	<b>Adequate</b>

For further information on ratings, please see the end of this report

### **Summary**

Children are happy and know the child minder and assistant well. They are relaxed in their company and enjoy the time they spend in their care. Children are developing their independence well and enjoy learning through play.

The child minder shows some understanding of her role to keep children safe and healthy. She manages interactions well. She provides different activities and resources that promote children's development and learning.

The environment is mostly safe, clean, and secure. The premises are welcoming and friendly and provides sufficient space for children to play. There is a variety of toys and resources, which are clean and well maintained.

The child minder is experienced and has a clear vision for her service. She manages the service adequately and operates adequate systems for record keeping. The child minder understands the importance of working with parents to make decisions about their child's well-being. She has established trust and clear communication with parents and has built very positive partnerships with them.

Children are happy and settled and have formed positive attachments with the child minder, the assistant and each other. They enjoy their time at the setting. Children play freely with the toys on offer and confidently ask for support or if they require resources. For example, they ask the child minder and the assistant for additional sheets of paper and colours whilst painting. Interactions between children are good and they show interest in each other's activities. Children are clearly relaxed, comfortable, and content at the setting. Children's behaviour is good.

Children show enjoyment in their play and learning. They have some control over how they spend their time and express their needs appropriately. For example, children have access to toys and resources in a designated playroom within the setting. Children's voice is strong, for example, they get to choose where they sit lunch time, "*I want to sit there*" and make decisions in relation to paint colours whilst taking part in a craft activity, "*Maybe I'll mix some.*" All children concentrate well, sustaining interest in things they have chosen to do for extended periods. For example, when taking part in an Autumnal painting activity. Children's voice is acknowledged. Children choose storybooks for the child minder to read, and they enjoy leading the play, involving the assistant as they take part in imaginary play, pretending to be a dog on a lead, "*Come on dog.*"

Children are familiar with their routines and show an appropriate level of independence. For example, they know where to keep their belongings and what toys they are allowed to access independently. They access resources that interest them, and they enjoy playing alone as well as with one another. They access and use the toilet independently and wash their hands. At lunchtime, children independently attempt to open their packaging, eat their finger foods and young children feed themselves with a spoon to eat yoghurt. Children show good fine motor skills and enjoyed painting and using scissors. They chatted happily with us expressing their enjoyment at the setting.

The child minder follows appropriate procedures to keep children safe. Her understanding of child protection and safeguarding is good. She responds well to potential scenarios. The child minder keeps a record of incidents and accidents, including times and dates. The child minder has a satisfactory understanding of how to keep children safe and healthy. She implements procedures to meet children's personal care needs, safety, and well-being. For example, she washes her hands after changing a nappy in line with infection control procedures. However, appropriate personal protective equipment (PPE), for example, the use of an apron, is not used to change the children in accordance with infection prevention and control guidance. She does provide food if required, however most children bring food from home. The child minder encourages children to drink water at lunchtime and at all times during free play. The child minder has up to date paediatric first aid training, however, during the visit, the child-minding assistant did not. During the visit, the child-minding assistant was left solely in charge of a group of children whilst the child minder undertook school runs. Following the visit, the child minder confirmed and provided evidence the child-minding assistant had successfully completed first aid training and the child minder had also updated her First Aid training. The child minder has a current food hygiene certificate and child protection and safeguarding training, however the assistant did not. The child minder had an awareness and policy on the prevent duty in relation to awareness of radicalisation.

The child minder and assistant know the children well. They have positive and close bonds with the children. For example, a child that had recently started at the setting was fully settled and confidently happy. We observed lovely interactions between the child minder, assistant and children during the visit. They ensure children are provided with plenty of options and their voice is acknowledged, for example during lunch time, the child minder asked children if they wanted support to cut their meat, "*Do you want to do some more cutting?*" They are also respectful with personal needs and ask children if it's okay to wipe their nose before doing so, "*Is it okay if I wipe your nose?*" The child minder and assistant manage children's behaviours well. They distract children who want the same resources by explaining sharing and offering another toy to the children to share, "*We are sharing aren't we? We can all have some.*" The child minder encourages children to be aware of their surroundings by prompting them to be careful with the plastic toy foods left on the floor.

The child minder provides suitable resources to keep children entertained, engaged and happy. During our visit, the child minder promoted language development by telling stories and naming colours and other objects with the children. The child minder uses incidental Welsh at times. The child minder plans weekly activities, however, does not always consider the development of skills within her planning. The child minder records children's progress by keeping a record of pictures, activities and children's achievements.



**Environment****Adequate**

The home environment is welcoming and has a dedicated playroom for child minding. Children also have access to the lounge and downstairs toilet. The child minder told us children do not access the kitchen and access is restricted by a safety gate. The outside area is accessed by children and includes a large playhouse, patio and lawn area. Cleaning materials are stored safely and out of reach.

The setting is secure with the external entrances locked at all times, however during the visit we observed the key was left in the door. Following the visit, the child minder confirmed the key is now removed from the door and stored at higher level. Visitors to the setting sign in and out and the child minder keeps records of children's attendance. The child minder completes relevant safety checks daily. Appropriate risk assessments are in place and include the premises, activities, and outings. However, during the visit we raised our concerns in relation to the safety of the nappy changing area. This was rectified following the visit and evidence of changes was forward to Care Inspectorate Wales. The child minder conducts regular fire drills which are timed and evaluated. First aid kits are checked regularly and are available for both the setting and trips out.

The child minder organises the space to provide good age and stage appropriate resources. All resources are organised and accessible for the children. For example, children have access to games and role-play toys. Other toys are stored at higher level. All resources are of a good quality and well maintained. A low-level table is available for children to complete craft activities and eat their meals.



## Leadership and Management

Adequate

The child minder organises her setting appropriately. She has considerable experience, has completed all mandatory training and has taken the opportunity to complete additional courses. Disclosure and Barring Service (DBS) checks are in place for all household members as well as assistants. Staff files are in place with the necessary documentation. We discussed staff supervisions and appraisals with the child minder and found these were not in place. Following the visit, the child minder confirmed supervisions had been carried out with both child-minding assistants, however no appraisals to date. As a result, this is noted as an area for improvement and will be followed up in the next inspection. The required policies and procedures are available and reflect current practice. Policies and procedures have been reviewed recently. The child minder has a statement of purpose, which is compliant with regulations and national minimum standards. A safeguarding policy is in place and outlines the need to report any concerns which could arise.

The child minder promotes safe practices. Public liability insurance is valid as well as the vehicle insurance. Record keeping for children are mostly in place. For example, the child minder has the relevant contracts and information on the individual needs of children, however not all permissions were in place during the visit. This was rectified immediately following the visit. We viewed daily registers and records and found these did not clearly evidence who was looking after children at all times, for example during the school runs. This was put in place following the visit. Records evidence that adult to child ratios are maintained, however during the inspection visit, the child minder exceeded her ratio during one school run.

The child minder is committed to improving her service and actively asks for feedback from parents and children by sending out questionnaires. She provides a quality of care report to CIW annually, which includes the opinions of those who use her service. The information received demonstrates positive views. The child minder has good partnerships with parents. Parents we spoke to confirmed they are very happy with the care given, *"I am happy with everything. They're great. We get plenty of information and I feel my child is developing well."* They told us communication is good. They receive verbal feedback when collecting their children.

## **Recommendations to meet with the National Minimum Standards**

R1: Mandatory training is completed by all staff members, for example Child Protection and Food Hygiene

R2: Hygiene practices in relation to nappy changing is further improved

R3: Planning of activities is purposeful and skill based

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

### Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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29	The provider is non complaint as no supervisions or appraisals had been carried out with assistants.	New
30	The provider is non complaint as records do not indicate who is looking after the children at all times.	Achieved
25	The service provider is non complaint as not all risks had been identified in relation to children's safety.	Achieved
24	The provider is not compliant as there is not always one qualified first aider present whilst looking after children.	Achieved
20 (1) (b)	The child minder did not make proper provision for the care, supervision and treatment of children at all times.	Achieved
30 (1) (a) Sch3.08	The child minder did not keep full records relating to the administration of medication.	Achieved

Ratings	What the ratings mean
<b>Excellent</b>	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.
<b>Good</b>	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.
<b>Adequate</b>	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.
<b>Poor</b>	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.

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