

Childcare Inspection Report on

Tracy Dixon

Mold



Date Inspection Completed

03/09/2019

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Ratings	What the ratings mean	
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	

Description of the service

Tracy Dixon is registered to child mind from her home situated in Leeswood near Mold. She provides a service throughout the year, Monday to Friday from 8.00 am to 5.00pm. She is currently registered to care for up to four children under the age of 12 years.

English is the main language of care with Welsh promoted. This is a service which does not provide the Welsh language 'Active Offer'.

Summary		
Theme	Rating	
Well-being	Good	
Care and Development	Good	
<u>Environment</u>	Good	
Leadership and Management	Good	

1. Overall assessment

Children are able to make choices and their views are valued. They are safe and very settled. The children receive consistent care where good manners and well being are promoted. The premises are cluttered but space is provided for a wide range of play activities. The child minder is organised and enthusiastic about the care provided. Parents are fully involved in the service.

2. Improvements

Since the last inspection the child minder has;

- bought new toys including a number of wooden toys, and
- children are involved in growing their own vegetables.

3. Requirements and recommendations

We have advised the child minder that Improvements are needed in relation to renewing DBS forms for the child minder and her husband (Regulation 28) in order to fully meet the legal requirements. A notice has not been issued on this occasion as there was no immediate or significant impact on the children using the service. We expect the registered person to take action to rectify this and it will be followed up at the next inspection. We made recommendations to further improve practice relating to infection control, providing a record of activities, including information from parents and children in the quality of care template and adding a date to any amended statement of purpose.

1. Well-being

Summary

Children are encouraged to speak and express themselves. They enjoy attending the service and are very settled. Children are offered a wide range of activities to stimulate their learning and they have opportunities to develop their independence.

Our findings

Children were confident to speak up and they were listened to. They made choices throughout the day about the activities they wanted and what they wanted to do. For example, one child asked for the connectastraws whilst another child opted to play with the dolls house. There was a good deal of conversation between the children and the child minder throughout the inspection. This allowed the children to express their opinions and make choices, for example about their favourite vegetables. Outside one child was not happy to wear rubber gloves for gardening and was provided with a pair of woollen gloves instead and the children were able to choose which vegetable they wanted to grow from three options available. Both children opted to plant broccoli.

Children are very settled and have formed positive emotional attachments. The children have been attending since they were babies and were very familiar with the routine within the home. They were comfortable colouring and drawing with one child on the settee and one on the floor. Older children have an "All about me" booklet to complete should they choose to do so. This allows children to express their likes and dislikes through drawings or in their own words and this is important for children who aren't good at or don't wish to communicate verbally.

Children interacted well with one another and with the child minder. They were polite and said please and thank you, often without being reminded. They were confident to speak to us about their likes and about what they were doing, for example showing and telling us about the clown mask they were colouring.

Children were enthusiastic about the activities provided. They had periods of child led uninterrupted play as well as opportunities to complete activities alongside the child minder. One child was very happy to put on the mask they had coloured once the child minder had attached the ribbon and was excited to see a photo of themselves wearing the mask. Taking a photo was a good opportunity to develop the child's self esteem, having a completed piece of work which could be used in the way it was meant. There was no record of activities, but the children talked about making cakes recently and the risk assessments showed children visit local parks, the beach and play centres providing good opportunities for physical play.

Children had a good variety of experiences including self directed opportunities which enabled their all round development to be promoted. The children improved their knowledge of healthy eating by playing a game of picking play food out of a box and deciding whether the food was healthy or not. This led to some discussions about some foods such as potatoes and bread. The child minder was careful to state where some foods such as cake were categorized as unhealthy, they could still be eaten in moderation. Independence was promoted by allowing children opportunities to do things for themselves. For example, one child was given a pair of scissors to cut around the mask with the child minder supporting by holding the mask. Children were encouraged to put on their own wellingtons and to go to the bathroom with support provided if requested.

2. Care and Development

Summary

The child minder is committed to providing responsive care and promoting good health and well being. She is aware of her roles and responsibilities and has policies and procedures in place to support her practice and keep children safe. The child minder encourages positive behaviour and good manners. She provides a good learning environment and is able to meet children's individual needs.

Our findings

The child minder has a good understanding of her responsibilities to keep children safe. This is supported by her practices such as, keeping the front door locked and recording the arrival and departure times of children in her diary to show she is adhering to adult and child ratios. The child minder was familiar with safeguarding procedures and had updated her safeguarding training in 2018. She was able to demonstrate her knowledge of safeguarding by responding to a scenario correctly. Good hygiene practices were followed with children washing their hands before lunch. We did not observe nappy changing, but noted the policy did not meet the guidance in the Public Health Wales (2014) Infection Prevention and Control for Childcare Settings (0-5 years). The child minder does not provide food, but is encouraging an awareness of healthy eating by getting children involved in growing their own fruit and vegetables.

The child minder treated children with respect and in a calm and courteous manner. She has a good understanding of child development and how to manage any issues with behaviour. Children were informed in advance when any changes were likely to happen such as clearing away for lunch and going outside. This helps to reduce anxiety and allows children time to adjust to any changes.

The child minder was responsive to individual needs of the children. We saw she works closely with parents and has taken into consideration changing circumstances at home which may impact on the child's well being. We saw from each quality of care review that she has considered ways to enhance learning and play. For example, she has removed a plastic play house and replaced it with a climbing frame which allows the children to use their imagination to make a den or a play house as well as climbing on it. The child minder has also replaced the plastic kitchen with a mud kitchen which allows children to make use of natural materials and be more creative. The child minder completes a learning journal for each child recording developmental changes and providing evidence through photographs and art work.

3. Environment

Summary

The child minder keeps the premises safe and secure. She provides a clean and well maintained space for children to play indoors. Toys and equipment are in good condition and there is a wide range for different types of play and age groups. Outdoor space is available and is used for physical play and for growing fruit and vegetables.

Our findings

The premises were secure with a two doors to exit the premises, one of which is kept locked. Safety gates are used indoors to prevent access to the kitchen and the stairs when young children are present. Risk assessments are in place for the indoor and outdoor space and for any outings. These help to minimise the risk of accidents and they are reviewed annually. An emergency evacuation practice that was taking place on arrival at the premises evidenced children understood how to evacuate the premises as they were taken across the road to a safe place and the child minder was explaining if there was an emergency, what would happen next. These practices take place monthly and are recorded in the daily diary. This helps children to remember the process and reduces any anxiety. The premises are appropriately maintained. The lounge is used for play and for meal times. The room is quite cluttered with furniture, ornaments and toys, but there is sufficient space for children to play on the floor or to sit on the comfortable seating for reading and colouring. A table is not available for children to sit and eat their food. The children use trays on legs to eat their packed lunch or for craft work, which isn't ideal, but the children looked to be comfortable. Children use the outdoor play space on a daily basis where possible. There is space for physical play on the lawn which included fixed play equipment such as a climbing frame. The space is also used to promote well being by growing and learning about fruit and vegetables. They had opportunities whilst outside to look at and to smell some of the vegetables growing including tomatoes, carrots and rhubarb. Children have access to a wide range of resources suitable for their needs. Resources are stored in the lounge, under the stairs and in a number of sheds and storage units in the garden. New toys have been purchased this year including a wooden dolls house to replace the plastic one, lego, Paw Patrol toys and an activity tray which can be used for a variety of activities including sand play, small role play and water play. The resources provided allow opportunities for different aspects of play and the development of skills including physical, craft, messy, role play and sensory play, motor and maths skills and language development.

4. Leadership and Management

Summary

The child minder is a good reflective practitioner who is committed to developing her service and responding to new initiatives. She has demonstrated her ability to be organised and maintain good documentation with the exception of renewing DBS documents. The child minder has a good relationship with parents and provides regular information and updates about their child.

Our findings

The child minder has a comprehensive range of policies which are reviewed each year and amended where necessary. Policies have been written to reflect changes to laws and society and these include a critical incident policy, data protection and the use of mobile phones. This demonstrates that the child minder adapts and responds to changes required. The statement of purpose contains the relevant information and is reviewed each year. However the date of review on the statement to show that it is the most up to date document was not recorded. We looked at records relating to the service and to individual children and found them to be in good order containing all of the relevant information.

The child minder has completed a quality of care review for each year. These showed that the child minder was committed to developing her service. The child minder had identified new resources or changes to resources each year. For example, purchasing lego because some of the children were now older and had outgrown the duplo. The child minder requests information from parents and children complete their evaluation of the service by drawing a picture about their time at the child minder's. None of this information has been included in the quality of care review. The child minder was receptive to any advice and is able to reflect on her practice.

The child minder is experienced and has qualifications and practical experience of working with children. She had updated her paediatric first aid qualification and completed safeguarding training in 2018. Although she did not provide food, she stated that she will update her food hygiene training this year. The child minder had previously registered in England and was unaware that in Wales any person in the household over the age of 16 years is required to renew their DBS certificate every 3 years. As a consequence, the DBS for herself and her husband are currently out of date and will need to be renewed.

The child minder has developed good relationships with parents and a number of thank you cards on display in the hallway confirm this. Parents receive a comprehensive parent pack with all of the relevant information including forms to record likes and dislikes prior to attending and "wow" moments to record any developmental milestones achieved at home. Parents are asked to complete an evaluation form 6 to 8 weeks after the child starts to make sure the service is meeting everyone's needs. Parents are kept informed daily of events verbally and through information technology including photographs. Parents have recorded they are satisfied with the level of information provided.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Recommendations for improvement

We recommended:

- the date of amendment is recorded on the statement of purpose;
- the child minder is aware of the latest infection control guidance in particular in relation to nappy changing;
- the comments of parents and children are included within the quality of care review, and
- a record of activities completed each day is kept to demonstrate children are offered a wide range of experiences.

6. How we undertook this inspection

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

One inspector visited the service on Tuesday, 3 September 2019 from 11.20 am to 2.40 pm.

We:

- observed the children and the care they received;
- spoke to the children;
- spoke to the child minder;
- looked at some records including policies, procedures, children's records and registers and
- we inspected the premises and the quality of toys and resources.

Further information about what we do can be found on our website: <u>www.careinspectorate.wales</u>

7. About the service

Type of care provided	Child Minder
Registered Person	Tracy Dixon
Registered maximum number of places	4
Age range of children	4 months to 12 years
Opening hours	Monday to Friday 8am to 5pm
Operating Language of the service	English
Date of previous Care Inspectorate Wales inspection	26 July 2016
Dates of this inspection visit(s)	3 September 2019
Is this a Flying Start service?	No
Is early years education for three and	No
four year olds provided at the service? Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh Language. It does not anticipate, identify or meet the Welsh language needs of children who use, or intend to use the service. We recommend that the service provider considers the Welsh Government's 'More Than Just Words follow on strategic guidance for Welsh Language in social care.
Additional Information:	·

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