

## **Quality of Care Part 2 Inspection Report** Sessional & Full Day Care

Name of Service:	The Women Centre Crèche	
Address of Service:	Beibhinn House	
	5 Guildhall Street	
	Derry	
Postcode:	BT48 6BB	
Telephone No:	02871267672	
E-mail address:	catherinebarr@womencentre.co.uk joannekarren@womencentre.co.uk	
Name of Registered Person:	Kathy Colhoun	
Name of Manager:	Joanne Karren	
Days Open:	Monday to Friday	
Opening hours:	9.15am to 12.45 1.15pm to 4.45pm	

<b>Type of Service</b> (please tick as appropriate)	Full Day Care	Play- group	Crèche	After School	Other (please advise)
			$\checkmark$		
	Private	Not for Profit	Other		

	Age Range	Number of Children Registered for	Number of Children Present	Number of Staff Present
Room 1	0-5 years	20	8	3

Name of Inspector:	Gemma Taggart
Date of inspection:	6 <sup>th</sup> May 2022

The following Inspection was carried out by the Early Years Social Work Team.

Under the Children (NI) Order 1995 settings are required to be registered with their local Trust if they provide a service as a day nursery, crèche, playgroup, out of school club or holiday club.

The Trust is then required to inspect the setting at least once per year. The setting is required to adhere to the requirements of their registration certificate and to the Childminding and Day Care for Children under Age 12 - Minimum Standards. The Standards contain a number of Quality Areas. The Standards can be downloaded at www.dhsspsni.gov.uk

#### Service Improvement

The following are the definitions used when inspectors make a requirement for compliance or a recommendation for improvement

#### • Requirement for Compliance

A requirement for compliance is a statement which sets out what the Registered Provider **must** do to improve the outcomes for people using the service. It will be linked to a non-compliance of a condition of registration and/or legislative requirements or regulations, and/or the Childminding and Day Care Minimum Standards for under 12 (July 2012) and Implementation Guidance.

#### • Recommendations for Improvement

A recommendation for improvement is a statement which sets out the actions a registered provider should take to improve or develop the quality of the service. It will be linked to the Childminding and Day Care Minimum Standards for Children under 12 (July 2012) and accompanying Implementation Guidance; Regional or National guidance issued by other professional bodies associated with day care provision and/or Best Practice guidance.

#### Inspection Details

The Minimum Standards document contains four Quality Areas which all providers are expected to meet.

These are:

- Quality of Care;
- Quality of Staffing, Management and Leadership;
- Quality of the Physical Environment;
- Quality of Monitoring and Evaluation.

The Inspection process operates on a 4 year cycle. **Each year** the Health and Social Care Trust will inspect each registered setting on **1 of the 4 Quality Areas**. This means that all 4 areas will have been inspected in a 4 year period.

This was an announced Inspection assessing the Minimum Standard Quality Area of **Quality of Care – Part 2**.

This section deals with some aspects of care that children receive in the settings. The **quality of care** is influenced by many factors, some of which, like room size and food and drink are easily measured and others, such as the ethos of care, development and play, which are less obvious.

Safeguarding has been placed at the start of this section as safety is at the centre of a quality service.

These Standards will help reassure parents that their children are receiving quality care in a safe environment.

Standard 1 Safeguarding and Child Protection is included in all Inspections.

This Inspection looked at a total of 6 Standards.

- Safeguarding and Child Protection (Standard 1);
- Food and Drink (Standard 5);
- Promoting Positive Behaviour (Standard 6);
- Working in Partnership with Parents (Standard 7);
- Equality (Standard 8);
- Additional Needs (Standard 9).

Self-Evaluation

As part of the Inspection process all registered day care providers are required to complete and submit a Self-Evaluation Form prior to the Inspection which provides information on how they operate their service. This is a component part of the overall inspection process.

The Self-Evaluation tells the Health and Social Care Trust how a Provider views the performance of their service. It also sets out how a Provider meets specific criteria within some of the Standards. Providers are encouraged to be open and honest, sharing all appropriate information as part of the Self-Evaluation process. Providers are asked to confirm the information they submit is complete and accurate.

By completing the Self-Evaluation, providers will reflect on practice and therefore engage in the inspection process.

#### **Previous Inspection**

#### If this is the first inspection, remove the boxes below and state this.

Date of previous Inspection:	14th April 2021
Quality Area Inspected:	Covid19

#### Progress from previous Inspection

Requirements for Compliance with Legislation and the Minimum Standards

• No requirements were made.

Recommendations for Improvement from Previous Inspection

• No recommendations were made.

#### Views from Children, Parents and Carers

An important part of the Inspection process is to obtain the views, where possible, of the children who are being cared for in the facility and also the opinions of the parents and carers who have chosen to use the facility for their child/children.

#### Children's Views

During the Inspection children were not spoken to as the age of the children did not lend itself to consultation.

As part of the Inspection process the Early Years Social Work Team seeks to issue questionnaires for completion by parents/carers and staff.

Due to legislation relating to the protection of personal information and confidentiality, the Provider is asked to supply the names and contact details of parents with children attending the facility. Normally this consent will have been provided as part of the enrolment process; however where it has not we ask that the provider advise the parents of Inspection and seek written consent using the consent forms forwarded

Par	ental Questionnaires
(a)	A total of 51 questionnaires were sent out to parents.
(b)	A total of 2 questionnaires were returned by the time of writing this report.
(c)	Both parental responses indicated that they feel their children are well cared for in the setting.
(d)	Both parental responses indicated that they feel the setting is managed well.
(f)	The following are some of the comments made by parents:
	"Lovely day-care facility & my child is well looked after."
	"My child loves his day with the girls at crèche. He goes in happy & comes home happy."

Sta	Staff Questionnaires		
(a)	A total of 6 questionnaires were sent to staff.		
(b)	All 6 questionnaires were returned by the time of writing this report.		
(c)	All 6 staff responses indicated that they feel equipped to carry out their role in the setting.		

### **Quality of Care**

## Standard 1 – Safeguarding and Child Protection

Children are safeguarded through systems and practices that tare consistent with the Regional Child protection Policies and Procedures.

#### Inspectors comments

From the evidence provided through provision of records/documentation, discussion and observation on the day of Inspection, the Crèche Coordinator demonstrated that children are safeguarded through systems and practices that are consistent with the Regional Child Protection Policies & Procedures.

There is a written Safeguarding & Child Protection Policy and Procedure in place, reviewed recently, which clearly states it is the setting's responsibility with regard to the reporting of suspected or actual child abuse or neglect and includes relevant contact names and telephone numbers. This was evident at time of Inspection and included:

- Trust protocol for reporting concerns;
- Reporting concerns without delay to the appropriate HSC Trust;

• Maintaining a signed and dated record of anything which causes them concern; and keeping concerns confidential to those who need to know.

The Self-Evaluation Form stated the Setting had received relevant training and demonstrated through discussion at Inspection an understanding of the responsibilities and duties in respect of Safeguarding & Child Protection and awareness that training must be updated every 3 years.

All parents had been made aware at enrolment of the procedures for Safeguarding and Child Protection, including the need to pass information without parental consent if there is a reasonable concern that a child may be at risk of or is suffering abuse or neglect.

Through discussion it was evident that parents are encouraged and facilitated to express any concerns they may have for their child's care and are given details regarding who to contact in the event that they are uneasy about the standard of protection afforded to their children.

The Self-Evaluation Form stated that there is a written policy and procedure for:

- Intimate/personal care and that parents are made aware at enrolment of the procedures for children's personal care.
- The use of Information and Communication Technology (ICT) equipment/Social Networking. Staff and volunteers have agreed and signed up to this policy at recruitment.
- Code of Conduct in relation to mobile phones, particularly those with cameras or video capability and participation in social networking websites. Staff and volunteers have agreed and signed up to this policy at recruitment.

• Taking photographs and that parents' give written permission for their children to be photographed and the use of these photographs is clearly explained (e.g. displays, child records, and promotional material).

• Whistleblowing which encourages staff to report any concern they have regarding the practice of colleagues, volunteers or trainees, relating to the care of children.

The Centre Coordinator ensured that Contact Persons' names and telephone numbers are readily available to staff.

The Inspector observed that the arrangements for safeguarding children were reviewed on an annual basis.

Through discussion the Inspector was satisfied that staff demonstrated an understanding of child protection issues and safe caring practices.

There is a system in place to ensure that children are collected from the setting by parents or those with parental responsibility or persons authorised by them to do so. Unless they are parents, persons authorised to collect children are aged 18 or over.

The Self-Evaluation Form stated and also through discussion with the Centre Coordinator it was evident that there are 2 Designated Child Protection Officers with responsibility for Safeguarding & Child Protection (15/03/22) who has attended relevant training which is updated every 3 years. At least 1 is available at all times during the hours of service provision for contact and consultation with staff and to offer instruction, advice and support. Through discussion, staff were aware of the arrangements of how to contact the DCPO when necessary. Their details were available to parents and carers.

Through discussion with the Centre Coordinator the Inspector was satisfied that the Centre Coordinator knew how to respond if a complaint or allegation was made against them or others in the setting.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

None

#### Recommendations for Improvement

## Standard 5 – Food and Drink

Children are provided with a wide variety of nutritious foods and drinks that will contribute to their health, growth & development.

#### **Inspectors Comments**

From the evidence provided through documentation, discussion and observation on the day of the Inspection, the Centre Coordinator, demonstrated that children are provided with a wide variety of nutritious foods and drinks that will contribute to their health, growth and development.

The Self-Evaluation Form stated that the setting has a policy on the provision of food and drink/menu planning for children.

The Self-Evaluation Form stated that the setting complies with guidance issued by the Environmental Health Department regarding the safe handling and preparation of food. The Centre Coordinator reported the setting was reviewed (06/04/22) and they retained their 5 star food hygiene rating which is on display to the public.

From discussion and observation it appeared that the nutritional value of snacks provided to children for the duration of the session complied with the requirement of this Standard.

The Self-Evaluation Form stated that the nutritional content of meals, snacks and drinks were prepared with reference to the PHA document "Nutrition Matters for the Early Years". This was further evidenced during the inspection visit. The Centre Coordinator advised staff are continually reviewing the menu to promote its cost effectiveness as they were not successful in securing funding from Children In Need toward healthy eating.

From discussion with the Centre Coordinator and from records viewed, the setting obtains and uses information from parents about individual children's dietary requirements, cultural and religious requirements, food preferences and any food allergies and ensures that staff understand and meet these guidelines. The Centre Coordinator advised that the committee decided to eliminate ham from their menu as there had been requests in the past, under cultural preferences.

During the inspection the Centre Coordinator advised that whilst there are some children with allergies, they sought guidance from parents and it was not necessary to liaise with a health professional. One parent was given prior knowledge of the menu to ensure it suited the diabetic needs of a child.

From observation of the session, the social value of eating together was recognised and promoted. On arrival the children were seated together for snack, consisting of pancakes, sliced melon and diced strawberries. Children's independence skills were being promoted, e.g. they were feeding themselves and putting butter/ jam onto their pancakes.

Fresh drinking water was available for the children throughout the session.

Evidence from the Self-Evaluation Form indicated that staff involved in the preparation of meals and snacks hold a Level 2 Food Hygiene Certificate.

There was evidence of the Setting's snack menu available and file copies were seen.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

None

#### **Recommendations for Improvement**

• None

## Standard 6 – Promoting Positive Behaviour

There is consistency in the use of positive strategies to establish acceptable patterns of behaviour and to promote children's well-being, self-esteem and development.

From the evidence provided through documentation, discussion and observation on the day of the Inspection, the Centre Coordinator demonstrated that there is consistency in the use of positive strategies to establish acceptable patterns of behaviour and to promote children's wellbeing, self-esteem and development.

The Self-Evaluation Form stated that there was a written policy on Behaviour Management (including bullying) and the methods used to understand, and manage children's behaviour.

Through discussion and observation at inspection there was evidence that the policy was discussed with parents. The Centre Coordinator advised the policy is included in the crèche booklet given at the initial pre-visit and parents sign that they have received policies.

On the day of inspection the environment was observed to encourage positive behaviour, and promote children's social and emotional wellbeing.

Staff interactions with the children were observed as warm, encouraging, child centred, promoting the development of children's self-confidence, self-esteem and self-control and tolerance.

There was evidence that staff understand and use the policy in their practice. Staff had a clear understanding that strategies used to manage challenging behaviour did not include methods that were degrading, humiliating, frightening or involved derogatory comments.

In keeping with the policy, physical restraint is not used unless a child is in danger of seriously hurting him/herself or others and physical punishment is neither used nor threatened. The methods used by the setting to manage children's behaviour were developmentally appropriate for the age and stage of the current group of children, such as distraction techniques, repetition, encouragement, attention and praise. Behaviour issues are never discussed in front of other children/ parents.

Staff were observed as positive role models for the children in their communication and engagement with them and with other adults.

Parents were regularly informed about their child's developmental behaviour. Good behaviour was acknowledged and shared with parents at daily handovers.

The Centre Coordinator reports parents are provided with written records of any significant incident relating to the management of their child's behaviour, on the day it occurred, which they dated and signed. All records are kept confidential. Parents can

attend course to support them manage children's behaviour in the Centre.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

None

## Recommendations for Improvement

• None

## Standard 7-Working in Partnership with Parents

# Provider work in partnership with parents to meet the needs of children both individually and as a group.

#### Inspectors Comments

From the evidence provided through records/documentation, discussion and observation on the day of the inspection, the Centre Coordinator demonstrated that she works in partnership with parents to meet the needs of children both individually and as a group.

The Self-Evaluation Form stated that there was a statement of purpose in place which sets out information for parents and meets the expected minimum content as outlined in Section 5 of the Standards.

Evidence during the inspection visit demonstrated how parents have been consulted about their child, responding appropriately to parental wishes or concerns.

The setting demonstrated that appropriate records were kept on each child as required by the Standards.

Arrangements were in place to ensure that any parent with a disability had access to the setting.

The needs of a parent whose first language is not English are taken into account by the setting.

The setting used various mediums of communicating with parents about their child's day such as verbal feedback/meetings/parents noticeboard/newsletter and written information. Parents are encouraged to participate in the work of the setting and offer views on its running or major changes through participating on the management committee, confidential performance review evaluations, etc. The Centre Coordinator stated uniforms for the children were introduced as a consequence of parental feedback.

Parents are fully informed about and support the approaches used to address different aspects of their children's behaviour in a positive way.

The Self-Evaluation Form stated that parents were made aware that their contact details may be made available to HSCT Trust Early Years Teams to seek the views of parents as part of the inspection process and the Inspection report is available to parents.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

## **Recommendations for Improvement**

• None

### Standard 8-Equality

#### The setting actively promotes equality of opportunity and inclusion for all children and their parents and positively values diversity.

#### **Inspector's Comments**

From the evidence provided on the day of the Inspection through documentation, discussion and observation, the Centre Coordinator demonstrated that she actively promotes equality of opportunity and inclusion for all children and their parents and positively values diversity.

The Self-Evaluation Form stated that there is an Admissions Policy which complies with equality legislation and a policy on equality.

On the day of Inspection, staff, children and other adults were observed to treat each other respectfully and with equal worth.

The Self-Evaluation Form stated, and from discussion it was evident, that equal opportunities were promoted with regard to employment and training of staff, students, trainees and volunteers.

The setting provided resources and activities that positively valued and reflected diversity in race/culture/gender/ability/disability and age.

The programme of play, resources and activities offered, encourages children to develop positive attitudes towards others, understand each other and respect diversity. These include Flash Cards, Media Initiative dolls, cultural dolls, jigsaws, books and posters/ pictures on wall displays.

Children were observed to play with a full range of equipment without gender stereotyping.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

None

#### **Recommendations for Improvement**

## Standard 9 – Additional Needs

The inclusion, welfare and development of children who have additional needs are actively promoted, based on appropriate assessment.

#### Inspector's Comments

From the evidence provided on the day of the Inspection through documentation, discussion and observation, the Centre Coordinator demonstrated that the inclusion, welfare and development of children who have additional needs are actively promoted, based on appropriate assessment.

The Self-Evaluation Form confirmed that the setting had a written policy on additional needs which is consistent with current legislation and guidance. It includes how the setting responds to children with additional needs including SEN and disability. The Policy on Additional Needs is available to parents.

The Setting demonstrated its awareness of the need to sensitively discuss with parents the needs of any child whom staff identify as possibly having an additional need and they are encouraged to seek relevant help. It was evident from discussion that a child's right to privacy and confidentiality is respected when discussing potential additional needs.

In the past the Setting reported how it had prepared for a child with additional needs by consulting with the parents and ensuring the environment, equipment and resources were appropriate to meet the child's needs.

In the past the Setting had individual care plans for children with additional needs including observations, discussion with parents and other professional agencies.

Where a child was identified as a child in need (Article 17, Children (NI) Order 1995) the Setting, with the knowledge of the parents, gave the appropriate information to the referring agency.

Staffing arrangements meet the needs of individual children with additional needs that attend the setting.

# Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance

None

#### **Recommendations for Improvement**

Were there issues arising at Inspection that are required to be dealt with that were not part of the Quality Area inspected?		

#### **Observations of the Care of Children**

On the day of the inspection there were 3 members of staff supporting 8 children, who were all seated for snack. 1 child was in the highchair whilst the remainder were seated around the same children's table to reflect the social value of eating together. As children finished their fruit and pancakes, 2 additional members of staff entered the crèche to facilitate staff breaks. Whilst staff tidied the area, children dispersed into segregated play areas. Children appeared content with staff and happy in the familiar surroundings.

As the baby was non mobile they remained in a separate section of the play area with soft furnishings and sensory resources to include special lighting, music, sounds, different textures, etc. Staff reported 3 babies were due to attend however 2 cancelled that morning. One staff member remained with the baby, continually chatting to them, describing their surroundings, asking questions and responding to their babbling. Staff blew bubbles and encouraged the baby to copy, whereby praise was offered for their efforts. The baby was able to observe the older children from a safe area. Staff were respectful towards all the children present.

Staff were observed supporting some children to learn turn taking, initially by rolling the ball then extended the play to taking turn to kick the ball along the floor then throwing it into a hoop. Some children preferred solitary play so moved freely around the home corner whilst engaged in role-play, from giving their dolly a bottle, to taking the hoover out, whereas another remained at Black & Decker tool station. Whilst the children did not engage with their peers they were able to observe and confident enough to seek assistance from staff if necessary.

Staff had set out some table top activities to maintain children's interests, such as painting, water tray, jigsaws. Children were encouraged to wear aprons at the water tray and painting, so staff explained to prevent getting clothes wet/ dirty. With consent staff supported some to take jumpers off and put aprons on. Children were engaged in parallel play, enjoying the relaxing water, fully focused on their play. At the easels children copied peer behaviours whilst those completing jigsaws were encouraged by staff to promote language through questions and praise.

#### **Complaints/Concerns since Last Inspection**

 No complaints/concerns have been expressed about this Setting since the last annual Inspection.

#### Self-Evaluation

A completed Self-evaluation was received within timescales and completed to a satisfactory standard. The contents were consistent with findings on the day.

#### **Inspection Summary:**

The Women's Centre Crèche has been registered since 2007 and is located in the city centre, near the Guildhall Square. The facility is registered for a total of 20 places per session and there are approximately 69 children on the register.

The setting aims to provide childcare to parents who are attending courses in the main building of the Women's Centre. The crèche is a pre-planned service, as opposed to a drop-in service, so that members of staff have an insight into the needs of the child prior to their arrival and staff ratios were appropriate to meet the needs of the children.

The setting is an inclusive community where all children have equal access to all areas of its provision. Over the years the setting invested highly on activities and materials to reflect the diverse families they work with, so they have varied resources to promote inclusion of ethnicity and multi-cultural communities. They also have developed resources for children with sensory needs, such as the infinity tunnel, sensory light bubble column with fish floating inside, etc.

There were no requirements for compliance or recommendations for improvements identified at this inspection, in respect of the theme. The Women's Centre Crèche continues to adhere to the Minimum Standards and Implementation Guidance.

On the day of Inspection there was 8 children present.

#### **Progress since the previous Inspection (unless this is the first Inspection)**

Requirements for compliance with Legislation, the Minimum Standards and Implementation Guidance

• No requirements were made.

#### **Outcomes of this Inspection:**

Requirements for Compliance with Legislation, the Minimum Standards and Implementation Guidance:

• There were no requirements identified at this inspection.

### **Recommendations for Improvement:**

• There were no areas identified at this inspection that would raise the quality of care.

Name of Inspector:	Gemma Taggart
Signature:	Gemma Taggart
Date Report Completed:	23/05/2022

Social Work Manager:	Trudy Doherty
Signature:	Tray Dott.
Date:	07/06/2022

Name of Registered Person/Leader:	
Signature:	
Date:	

## CONTACT DETAILS

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