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Care and Social Services Inspectorate Wales

Childcare Inspection Report on

Action for Children Pre-School Project

Neath Port Talbot Hospital
Baglan Way
Port Talbot
SA12 7BX



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Description of the service

Action for Children Pre-School Project was registered in November 2009 and provides care for a maximum of seven children aged two to three years who have physical, sensory or cognitive impairment or medical conditions. The service is located in the Children's Centre at Neath Port Talbot Hospital, Baglan, Port Talbot. The aim of the service is to encourage children's development through play and learning opportunities. The service operates from 9.30am to 12pm and 1pm to 3pm Monday to Wednesday. The person in charge (PIC) for the project is Tracey Castaldi and the service is overseen by the responsible individual, Jane Weeks. The service is provided in English with incidental Welsh. As many children have communication needs, spoken words are supported by objects, sign along and picture exchange system (PECS).

Summary of our findings

1. Overall assessment

Children really benefit from this service, which is thoughtfully planned and extremely child-centred. They settle quickly and enjoy a wide range of play and learning experiences that are tailored to meet their needs. Staffing ratios always exceed the national minimum standards to ensure that children receive one to one attention. Staff are nurturing, consistent, knowledgeable and there is exceptional teamwork. The environment is very safe, secure and well maintained. Children have free access to a wide range of good quality toys, materials and equipment to encourage them to play, explore and learn. The service is very well run. Leaders work in partnership with parents and other professionals in health and education to ensure that children's needs are identified and addressed appropriately so that they benefit from the service. Parents are very happy with the service and they feel that their children have developed significantly through attending. They told us they are fully involved in their children's play plans and that the service has taught them to support their children's development at home.

2. Improvements

- The playroom has been re-organised, redecorated and new equipment purchased;
- a new parent information board has been fixed in the corridor;
- staffing has increased; there are four support workers and five regular volunteers; and
- the service provided play and development sessions to support parents.

3. Requirements and recommendations

None

1. Well-being

Summary

Children are very happy; they settle quickly and have opportunities to make decisions. They thoroughly enjoy their play and have an excellent choice of interesting activities that are designed to promote their development. Children experience very warm and caring relationships. They are learning to interact and to cooperate with each other and with staff.

Our findings

1.1 To what extent do children have a voice?

Children are able to express their views and needs in a variety of ways and they are listened to.

Many children who use this service have limited speech and language abilities; however, we saw that every child was heard because they were able to express their needs and preferences through their facial expressions, looking at what they wanted, signing and body language. Each child had an individual play and development plan which was promoted throughout the session, with a mix of free play and focused tasks. We saw that children chose activities during free play sessions and they played alone or as part of a group in activities including singing songs, counting, playing with musical items, feeling textures, using building blocks, playing with cars, dolls and plastic animals, using swings and slides and playing with water. Children enjoyed 'hello time' when they chose who to pass the ball to next and they could either say 'hello' or sign it or press a box that said 'hello' for them. We saw children choose a seat for themselves at the table for snacks; they chose what they wanted to eat and drink and asked or signed for more.

Children have a significant voice at this service.

1.2 To what extent do children feel safe, happy and valued?

Children are familiar with their surroundings and the routines of the service which makes them happy and gives them a sense of security and belonging.

We saw that most children arrived happily at the service and they moved around with confidence and went to staff or their preferred play area. Each child had a keyworker who worked closely with them to help them settle in and get the most out of attending. Two parents told us that their children had difficulty settling at first because they had never been separated from them. They said that settling in was very much on the children's terms and they were able to stay with their child and play alongside them until they were happy, or wait in the parents room next to the playroom. There was a very relaxed atmosphere and we saw children playing independently and with others. We saw that children could share how they felt by placing a happy or sad face on a mood board. Children approached staff

readily for cuddles or assistance and they smiled happily, nodded and waved their arms when they were praised for their efforts and contributions. Set routines helped children to understand what was happening so they were happy and felt secure. For example staff struck a triangle to signal the change in activities and said “Now it’s time to say hello” and held up a picture of a beach ball, which represented the activity because children held the ball when they said their names and hello. Many activities had an associated song or jingle and we saw that children enjoyed the songs and joined in. For example they sang along enthusiastically to ‘This is the way we wash the table’ as they wiped the table after snack time and they sang a goodbye song and waved to everyone at home time. We saw children’s work and photographs displayed in the corridor and the playroom and each child had a chair outside the playroom with their name and photograph, which gave them a good sense of belonging. We saw children put their bags on their chairs and smile as they pointed to their names and photos.

Children feel fully valued, safe and happy.

1.3 How well do children interact?

Children are learning the importance of sharing and turn taking.

Children played happily. We saw that children were learning to co-operate and responded very well to praise. For example they smiled and laughed during ‘hello time’ as they threw a beach ball to staff and other children, they waited their turn for the slide and they shared when playing with boats and water and waiting their turn to blow bubbles. During ‘hello time’ and ‘story time’ the children sat together and mostly listened to what other children had to say in response to questions from staff. Children waited patiently at snack time and said or signed ‘please’ and ‘thank you’. We saw that children followed staff’s actions for brushing teeth and they responded and cooperated when asked to be ‘gentle’ and ‘careful’. We did not see any disagreements or disputes during our visit and children were relaxed and happy.

Children interact well with each other and with staff.

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

Children benefit from a range of play opportunities designed to support their development.

Children smiled and showed excitement in their facial expressions and body language as they played inside and outdoors. Children engaged with a very good range of activities and they enjoyed free play as well as structured staff-led activities inside and outdoors. These included sensory work with textures, sounds and light, art and craft, colouring and mark making, puzzles, toy cars, farm animals, dolls and soft toys, picture books, sing along and story-telling in the playroom, and slides, swings, boats and water play and a Wendy house outside. Children concentrated for a suitable length of time for their stage of development.

Two children smiled and nodded when we asked if they enjoyed coming to the playgroup. Children were engrossed in ‘hello time’ and ‘story time’ and they answered questions, counted, smiled and giggled. We heard some children sing and count in English and Welsh.

Children thoroughly enjoy their play and learning experiences.

1.5 How well do children develop, learn and become independent?

Children have good opportunities to learn and become independent.

Children had access to a rich and imaginative play environment. Toys, equipment and resources were arranged so that children could help themselves and routines and staff-led activities supported children’s development. We saw that most children were confident to choose their play and try new things. We saw that children enjoyed singing songs and they joined in eagerly with familiar responses, repeated phrases and actions. Children were developing their self-help skills; they followed a teeth cleaning programme every session and they were encouraged to wash and dry their hands without adult support. Parents said, “He has come on amazingly here” and “She is thriving here and doing much more for herself”. The children’s development records evidenced that they were making excellent progress and developing new skills in line with set targets.

Children are learning and developing very well and are becoming more independent.

2. Care and Development

Summary

Staff are very motivated, consistent and thorough in supporting children's development and in keeping them safe and healthy. Staff have an excellent understanding of the children's individual needs and work together effectively. They manage behaviour very well and provide a range of activities to enable children to play, learn and develop.

Our findings

2.1 How well do practitioners keep children safe and healthy?

Staff are well trained and know their responsibilities.

Staff had attended relevant training including health and safety, paediatric first aid, food hygiene, safeguarding training and the Prevent Duty relating to terrorism and radicalisation. Staff were very consistent in ensuring children's safety and promoting healthy lifestyles. They were well aware of the importance of recognising signs of abuse and were clear about what to do if they had concerns about a child or in case of an accident. We heard staff giving safety messages such as 'be careful', 'be gentle' and 'use walking feet' and reminding or supporting children to wash hands before eating. We saw that toys, equipment, the kitchen and toilets and the outside areas were very clean and well maintained; we saw that staff used gloves for food preparation and changing nappies and cleaned the tables before snacks. Staff encouraged healthy lifestyles. Children were offered water and milk and a healthy snack of wholemeal bread with cheese spread, a crispy snack, banana slices and halved grapes. We saw staff encouraging children to eat the grapes by offering them to each other and saying "Oh, thank you, mmm this is delicious!" and we saw that all the children then tried them and some asked for more. Staff encouraged children to brush their teeth using songs, actions, pictures and a puppet to help children understand. We saw that keyworkers kept records of children's health needs and any allergies, up to date. Staff supported children to use the large outdoor play area whenever possible and there was also a trampoline room for physical play to promote an active lifestyle. We saw staff applying sun cream to children before they went outside.

Staff consistently and successfully keep children safe and healthy.

2.2 How well do practitioners manage interactions?

Staff are very good role models; they are consistent in their approach and consider the children's level of understanding and stage of development when managing interactions.

Staff followed the project's positive behaviour policy, which promoted reinforcement of good behaviour and encouraged them to think about the reasons behind children's behaviour and their stage of development. Each child had a behavioural plan and additional support and

advice was available to staff and parents from a designated behaviour support worker. Staff set a good example by always speaking calmly and politely to each other. They listened to the children or watched their expressions and body language closely and gave them plenty of time to express themselves or finish activities or eat their snacks. This created a very calm and positive atmosphere. Staff used every opportunity to praise positive behaviour such as helping tidy up and sharing and they celebrated every achievement. We heard lots of praise and encouragement such as 'Thank you for sitting so quietly', 'Good singing', and 'Well done!' Staff made good eye contact with children; they spoke calmly and clearly and they also used pictures and sign along so that children understood. Staff used routines such as the sound of a triangle and songs very effectively to gain attention and cooperation. The triangle was used to signal the start of a new activity such as circle time and snack time and songs were used to encourage children to settle down or join in activities. We saw that children settled and joined in with singing 'It's time to say hello' and they sang 'This is the way we wash the table/ dry the table' as they helped to clear up after snacks. We also saw staff using diversion, such as a 'fiddle box' of interesting items and using sensory stimulation such as brushing children's arms and legs to calm and relax them so they were ready to concentrate and take part in their planned activities.

Staff are highly effective in managing interactions.

2.3 How well do practitioners promote children's play, learning and development and meet their individual needs?

Children are developing their potential because staff are well trained and provide appropriate levels of support. Staff know, understand and meet children's individual needs and plan for the next steps in their play and learning.

Staff had undertaken specialised training in understanding diversity, autism, downs syndrome, sign along and language and play training to help them understand children's needs and to support children with speech, language and communication. Staff worked well as a team and they communicated very successfully with the children. Spoken words were always supported by sign language, pictures and objects. Staff knew the children very well and were aware of situations and activities that could upset or unsettle them. They monitored and recorded children's expressions and body language to ensure that they were happy and settled. Each child had a keyworker and an individual play plan with clear learning and development targets and we saw a good mix of free play and staff led activities. Staff worked one to one with children in designated areas for sensory work, art, cognitive/ fine motor skills and communication and play. They used the children's interests to design learning opportunities, for example a child loved cars but had an aversion to paint so staff used cars to make tracks and patterns through paint, which engaged the child. Staff constantly encouraged children to point, sign, repeat words and numbers. We saw staff use hand over hand support to guide some children and activities were modified or changed to meet children's needs. Children had opportunities to use and experience the Welsh language. All staff used Welsh words, numbers, phrases and songs. We heard children singing, counting and saying

colours in Welsh with staff, we heard staff say ‘da iawn’ and ‘diolch’ throughout each session and we saw bilingual materials and resources used in addition to objects and pictures. There was a developmental tracker and play plan for each child and these were shared with parents so that they could continue the activities at home. Keyworkers made detailed records each day and the records we saw indicated that children were making good progress as a result of the staff support. One parent said, “He has come a long way. He is calmer, happier and more confident. The strategies used have improved his quality of life significantly.”

Staff are excellent in promoting children’s play, learning and all round development.

3. Environment

Summary

Children are cared for in a warm, nurturing and stimulating environment, which is kept under review and continually developed to meet their interests and needs. Children have access to an excellent range of toys, resources and equipment to enhance their overall development.

Our findings

3.1 How well do leaders ensure the safety of the environment?

Leaders ensure that children are cared for in a safe, clean and secure environment and that any risks are identified and reduced or removed.

The entrance to the service was secure from unauthorised access as there were key pads on the doors and visitors had to show identity and sign in and out. There were risk assessments for all areas of the premises, inside and outdoors and for activities and particular aspects of care. Staff told us they checked the indoor and outdoor play areas and equipment each day and cleaned them regularly and we saw that there were records to support this. All areas, equipment, furniture and toys were very clean and in good condition and the project had been awarded a level five hygiene rating from the Food Standards Agency, which is the highest award. Personal information about children and staff was secure and kept confidential. Records evidenced annual tests for heating and electrical equipment and that staff carried out regular fire drills to keep children and visitors safe.

Leaders are very effective at ensuring the safety of the environment.

3.2 How well do leaders ensure the suitability of the environment?

Children are encouraged and enabled to do things independently because careful consideration is given to the layout of the play areas.

The indoor and outdoor play areas were very welcoming and provided a rich environment for play, learning and development. Children's work was on display and there was a musical and sensory activity board in the corridor leading to the playroom to encourage their interest. Children had their own chairs with their name and photograph, which created a good sense of security and belonging. Resources were stored in open boxes and on low level units so that children could access them easily. We saw children choosing activities and moving freely from one activity to another. We also saw that specialist equipment was in place to assist children and help them take part in activities. For example, there were weighted lap cushions, a shoulder snake, vibrating cushions and a bobble cushion, which all gave sensory feedback to children and supported them to sit still or focus. As well as the main playroom, children used a sensory room with music and different light effects, a

trampoline room, toilets and an enclosed outdoor play area and garden. The enclosed outdoor area enabled children to safely explore a range of play opportunities because it had soft surface play areas, benches, a sensory garden, lawned areas and shrubs. The paths outside meandered and went up and down slopes to help children to develop confidence on their feet as well as on trikes and cars. There were suitable facilities for staff to have a break and for storing their belongings. The kitchen, staff facilities and all other areas were out of bounds to the children.

Leaders ensure that the environment is highly suitable for children and staff.

3.3 How well do leaders ensure the quality of resources and equipment?

The service has resources and equipment which are appropriate and are high quality.

Children had access to good quality toys and materials that suited their needs and interests. We saw children engrossed in playing with natural objects and household utensils, cars, dolls, puppets, mark-making, building with blocks, gluing coloured shapes, playing with rice, looking through books, throwing a beach ball to each other and playing outside, where they had a wide choice including swings, rockers, slides, a Wendy house, tunnels, a small trampoline and sand and water play. The toys and equipment were in very good condition and we saw that different cultures and identities were reflected and celebrated. For example, there were different costumes in the dressing up area, dolls and puppets representing different races and play foods from different countries and Welsh numbers, colours, shapes and months. The service offered a balance of high quality toys and equipment as well as low cost home-made and innovative ideas. For example there was a range of light and sound equipment such as musical instruments, light boxes, spotlights, and bubble towers but staff had also made their own equipment such as boxes of items with different textures; cards with pictures of toys/ activities so children could choose by pointing; and a large bowl that children sat in to play with rice or small objects, which supported sitting and concentrating. There was also a range of specialist equipment to support children such as hoists and specialised seating.

Leaders are very effective in ensuring that resources and equipment are high quality and this supports children’s learning and development.

4. Leadership and Management

Summary

The leadership at the project is highly effective and provides clear direction. Leaders thoroughly plan and review the service provided and they fully involve parents, staff and other partners. Staff are very well trained and they receive regular supervision and appraisals to improve their skills and knowledge. There are excellent partnerships with parents and professionals which enhance the well-being of children

Our findings

4.1 How effective is leadership?

Leaders have a clear vision for the service and set clear and relevant policies and procedures that are focused on children's needs. The PIC for the project creates a very positive ethos where children, parents and staff feel valued.

We found that the service was very well run. The PIC was very clear about the aims of the service and was a very visible presence in the project. We saw her engaging with children, parents, staff and health professionals throughout the day. She was very open and approachable and she reinforced good practice by celebrating successes and achievements with staff as well as being an excellent role model. Staff welcomed the PIC's support and advice and children were relaxed and at ease in her presence. We saw that the PIC regularly reviewed the service information, policies and procedures. The statement of purpose accurately reflected the service and the policies we looked at showed a clear understanding of best practice for children with additional needs. Staff told us that that new policies and guidance were discussed in regular meetings and during staff supervisions so that everyone understood what was expected. The systems to monitor the development of children were very effective. The PIC worked with a team of paediatricians, health visitors, physiotherapists, occupational therapists and speech and language therapists to identify children's needs and how they could be supported. She met regularly with staff to plan activities, discuss children's development, evaluate successes and failures and make changes to play plans. The PIC set and maintained high standards for her staff, which was evidenced by discussion with staff, staff records and in the consistent practice that we observed in the project.

Leaders are highly motivated and extremely effective.

4.2 How effective is self evaluation and planning for improvement?

Leaders create a reflective culture of ongoing review and improvement, which takes into account the views of children, parents, staff and professionals.

We saw that leaders were effective at self-evaluation and identifying areas for improvement. There was an annual quality of care review report which included feedback from children, parents, staff and professionals linked to the service. The report looked at areas that had been successful within the service, took into account suggestions that had been made, and also set out a development plan for the coming year. Children's feelings about activities were gained through direct communication where possible; watching what they enjoyed and how they reacted; asking them to use smiley or sad face stickers; monitoring their engagement and their achievements. Parents told us they were able to talk to staff or the PIC at any time and they also attended meetings and completed annual questionnaires. There were records of regular staff meetings when the team reviewed what the children enjoyed, what had gone well and what could be improved. Partners in health, education and social services were consulted though regular meetings and there were also comments books for parents and professionals to leave their comments and suggestions. We saw that the service had made changes as a result of feedback. For example, additional equipment had been purchased and activities were changed to meet children's needs and preferences. The service had also organised 'play and development sessions' for parents when they could attend with their children to see how staff supported speech and language, developed play and managed behaviours. Parents told us this had been 'brilliant' and 'really helpful' as they were able to learn the methods staff used and repeat them at home.

Leaders are highly effective at self-evaluation and planning for improvement, which benefits children, parents and staff.

4.3 How effective is the management of practitioners, staff and other resources?

Leaders ensure that staff are well supported; that they are clear about their roles and responsibilities and that resources are sufficient and suitable.

We saw that leaders used staff and resources effectively and that they worked alongside staff and other professionals to meet the children's needs. The ratio of staff was very high so that children received a lot of individual attention. We spoke to staff and volunteers and they confirmed that they had received a good induction and that the PIC gave them regular feedback on their performance, which helped them to work more productively. Staff said they felt valued because their views were listened to and they were provided with opportunities to develop their skills and interests. Volunteers said they had lots of opportunities to shadow staff so that they could support children's play. We saw that the leaders deployed staff effectively to meet the children's needs as well as to promote their job satisfaction. For example staff took turns for cleaning, food preparation and snack supervision and they had responsibility for different areas in the playroom. Staff worked well together and said that they learned from each other. Leaders followed safe recruitment processes. Staff records contained all the required information including DBS (Disclosure and Barring Service) and identification checks and references. The PIC ensured that staff received regular supervision and an annual appraisal of their practice and training needs. Training records showed that the leaders had provided all the required training for staff as

well as specialised training to meet the needs of individual children. Staff said they benefited from training in communication, autism awareness, play and developmental assessment and sensory processing training which had helped them recognise that some children needed more time to respond. Staff had access to a range of professionals including speech and language therapists, physiotherapists, paediatricians, health visitors and a behaviour support worker to support their work with children. Leaders had raised funds for new equipment through sponsored activities, events and donations. They ensured that toys and equipment were in good condition and that they were checked, cleaned and replaced regularly.

Leaders manage staff and other resources extremely successfully.

4.4 How effective are partnerships?

Leaders and staff involve parents in making decisions about their children's care and work closely with other professionals to meet children's needs.

Leaders and staff encourage parents to become involved in their children's play and learning so that children experience maximum benefits from attending. For example parents told us they were given copies of their children's play and development plans to follow at home and they had attended sessions with their children so that they could learn to support their play development and manage their behaviour. We heard staff give parents feedback and saw a staff member rush to tell a parent that an important goal had been achieved. Parents were also given information about the service in newsletters, verbally, and by displaying leaflets and advice on notice boards in the corridor. The service works very closely with other agencies involved with the children, and makes further referrals where necessary in order to provide the support each child needs. The records for children evidenced input from other professionals such as paediatricians, health visitors, physiotherapists and speech and language advisors. We saw that professionals such as paediatricians and Flying Start staff had observed children at the project to learn how staff relaxed children and managed their behaviour. Parents were very happy with the service and all said they wished they could have more sessions. They said:

- "They have worked well with him so he copes with the change in environments. They used photos to calm and prepare him. He used to be so clingy but he runs in smiling and laughing now";
- "They taught me to speak slowly and about planned ignoring for poor behaviour and it works. Everything I know has come from these guys";
- "They are not only supportive to the child but also to parents. They have taught us how to manage (the child) through different approaches. They have always been positive and very supportive through the bad times"; and
- "I don't feel alone anymore. They have put me in touch with other parents and are always there for me".

Leaders and staff have excellent relationships with parents and with professionals, which benefit children.

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

None

6. How we undertook this inspection

One inspector made an unannounced visit to the service on 19 June 2017 for a full day and a pre-arranged visit on the afternoon of 21 June 2017;

- we had limited communication with three children and spoke to four parents, one grandparent, four staff, two volunteers, a behaviour support worker and the person in charge;
- we observed children and staff in the playroom and outside;
- we observed two children using the SOFI-2 tool to capture evidence of children's engagement and the care provided by staff;
- we inspected the premises;
- we looked at a sample of documentation and policies including the last CSSIW inspection report, the registers and diary, children's records, staff files, the statement of purpose, the quality of care report and a sample of policies and procedures; and
- we gave feedback to the person in charge and the responsible individual following the inspection.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	**Children's Day Care** **Sessional Day Care**
Responsible Individual	**Jane Weeks**
Person in charge	**Tracey Castaldi**
Registered maximum number of places	**7**
Age range of children	**16 months – 4 years**
Opening hours	**9.30am - 12.30pm and 1pm - 3pm** **Monday, Tuesday and Wednesday only**
Operating Language of the service	**English**
Date of previous CSSIW inspection	**30 April 2014**
Dates of this inspection visit(s)	**19 and 21 June 2017**
Is this a Flying Start service?	**No**
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 people /children who use, or intend to use their service. We recommend that the service provider considers Welsh Government's '*More Than Just Words follow on strategic guidance for Welsh language in social care'.* However, the service promotes the use of Welsh. During the inspection we saw staff incorporate Welsh language and songs into each session and we heard a lot of incidental Welsh. Spoken words are supported by objects, pictures and sign along because children using this service have significant communication needs.
Additional Information:	