



Childcare Inspection Report on

Meithrinfa Ysgubor Fach Creche

**Pontcowin Farm
Bancyfelin
SA33 5NB**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh



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Description of the service

Meithrinfa Ysgubor Fach Creche is a full day care and is registered to provide care for 36 children from 6 weeks to 12 years old. The nursery opens Monday to Friday between the hours of 7am and 6pm. They registered with Care Inspectorate Wales in January 2015. Care is provided bilingually. They operate from a purposefully converted barn on a farm in Bancyfelin, near Carmarthen. The registered person is Eleri Thomas and the person in charge is Jessica McLavy.

Summary of our findings

1. Overall assessment

Children are active, happy and engaged in their play at this service. They enjoy the activities offered, such as stamping, role play and free play. Although many staff were new to the service, they were caring and were able to generally meet the children's needs. However, some improvements are needed around leadership and management.

2. Improvements

Immediately following the inspection visit, the registered person arranged that a DBS check was carried out on one member of staff whose certificate had expired.

The registered person forwarded us a copy of an updated Statement of Purpose which included the contact numbers and address.

3. Requirements and recommendations

We notified the registered person that the nursery was not compliant with regulations relating to:

Regulation 24: Staff suitability checks: This was identified as a non-compliance during the inspection as all documentation available in staff files was not in line with regulation.

Regulation 29: Employment of staff: This was identified as a non-compliance during the inspection as staff did not receive appropriate supervision and appraisal.

We have not issued a non-compliance notice on this occasion.

1. Well-being

Summary

This inspection did not focus on well-being on this occasion because the inspection focused on leadership and management and we had carried out a full inspection on 14 June 2018.

However, during the inspection we observed children being given plenty of choices by one member of staff. Children were happy and enjoyed their play, for example, during a stamping activity a child proudly showed her work and said “Look at my castle”. Children had a busy day, which included outdoor play, making Christmas cards, stamping and they participated in circle time and a singing session.

This area will be considered in full during future inspections.

2. Care and Development

Summary

This inspection did not focus on care and development on this occasion because the inspection focused on leadership and management and we had carried out a full inspection on 14 June 2018.

However, during the inspection we noted that some members of staff effectively praised children in their activities. However, on inspecting the planning file, we identified that the service needed to develop this area further. We were informed that the service was currently amending the menu to include a variety of healthy home cooked meals, which included beef stew, sausage, mashed potato and vegetables and spaghetti bolognaise. Since the last inspection, leaders had ensured that there is nappy changing policy in place stating that staff change gloves before applying cream. Staff kept records of medication records and had ensured that parents had signed them. However, dosages were not always recorded.

This area will be considered in full during future inspections.

3. Environment

Summary

This inspection did not focus on the environment on this occasion because the inspection focused on leadership and management and we had carried out a full inspection on 14 June 2018.

During this inspection, the responsible individual informed us that they had placed toilet roll holders in the toilets.

This area will be considered in full during future inspections.

4. Leadership and Management

Summary

Leaders have developed systems and checks to ensure that the service is able to function on a day to day basis. However, more organisation is needed in some areas. The service is mostly compliant with the regulations and meets most of the national minimum standards.

Our findings

4.1 How effective is leadership?

Leaders strive to ensure the best outcome for the service but do not always apply themselves in an organised manner.

Leaders had notified us of changes, for example, we were informed of staff changes. The DBS checks for one member of staff had expired although this was not apparent from the matrix as there was a typo in the year of expiry. During the inspection process, the responsible individual ensured that a DBS check was carried out immediately. There were discrepancies in the information recorded on the matrix and the actual expiry date. The DBS check for another member of staff had also expired in October 2018. However, at the time of inspection the member of staff had very recently left her employment at the service. We viewed the register of staff and children and saw that there was no supernumerary available on all occasions, especially on Thursdays and Fridays. The Statement of Purpose accurately reflected the service provided. However, the address and contact numbers were not included. Leaders ensured that staff had signed a declaration when they started at the service to ensure that they understood all policies. However, this was not done on an annual basis or when new policies were introduced. Leaders had introduced new policies including a mobile phone policy and had recently updated the Staff Behaviour Policy.

Leaders do not always ensure that

4.2 How effective is self evaluation and planning for improvement?

This inspection did not focus on self-evaluation on this occasion as we had carried out a full inspection on 14 June 2018. However, we have recommended that leaders forward a copy of the latest Quality of Care review to CIW.

This area will be considered in full during future inspections.

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

Leaders do not give due care and attention to supervision and appraisals. Staff files are not complete.

Staff at the service on the day of the inspection worked well together. However, leaders are not meeting their regulatory responsibilities in relation to the staff recruitment procedure as pre-employment checks are not fully completed before staff start working at the service. We viewed three staff files and found that not all pre-employment checks required by regulations had been complete. One to one staff supervision and annual appraisals were not undertaken.

The management of staff and resources is not sufficiently effective.

4.4 How effective are partnerships?

This inspection did not focus on partnerships on this occasion as we had incorporated this into the full inspection carried out on 14 June 2018.

This area will be considered in full during future inspections.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

Regulation 24: Staff suitability checks: This was identified as a non-compliance during the inspection as the documentation available in staff files was not in line with regulation.

5.2 Recommendations for improvement

We recommend that leaders ensure that they:

- Accurately record dates on the DBS matrix and that they have a system in place to keep track;
- consider expanding the use of the DBS update service;
- further develop the planning of activities and ensure that children have opportunities to contribute to the planning;
- ensure that all staff files are always up to date;
- record actual times and number of staff and children present on fire drill records;
- introduce alternative arrangements when the responsible individual or person in charge are not available;
- ensure that there is always a supernumerary person on site;
- forward a copy of the annual Quality of Care report;
- ensure that staff always record dosages on the medication form; and
- ask staff to sign policies, including any new policies, on an annual basis.

6. How we undertook this inspection

This was a focused inspection that was conducted following receipt of concerns.

Two inspectors undertook the inspection on 9 November 2018. During the visit we;

- spoke with children, staff and parents;
- we observed the children and the care they received;
- inspected the premises; and
- looked at a wide range of records including the statement of purpose, staff files, and a sample of children's records.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Children's Day Care Full Day Care
Registered Person	Eleri Thomas
Person in charge	Jessica Mclavy
Registered maximum number of places	36
Age range of children	6 weeks to 12 years old
Opening hours	7am to 6pm, Monday to Friday
Operating Language of the service	Both
Date of previous Care Inspectorate Wales inspection	14 June 2018
Dates of this inspection visit(s)	9 November 2018
Is this a Flying Start service?	No
Is early years education for three and four year olds provided at the service?	No
Does this service provide the Welsh Language active offer?	This is a service that offers the 'Active Offer' of the Welsh language. It provides a service that anticipates, identifies and meets the needs of people who use, or may use, the service.
Additional Information:	