Inspection Report

Regulation of Care Act 2013

Child Day Care Centres

Sandcastles at Ballacottier

Unannounced Inspection

Date: 27 May 2016

Time: 9.35am
Completing and returning your report

To complete your report form, enter text by clicking on the box see the instructions below. Use the tab key to move to the next box.

1. Provider’s action plan
   a. Add details of your actions to complete the requirements/recommendations (if applicable)

2. Provider’s comments/response
   a. Confirm you have read and agree/disagree the contents of the report by clicking on the appropriate box
   b. State any factual inaccuracies found, add comments (if applicable)
   c. Sign (type name when returning electronically) and date

3. Return your report to randi@gov.im within 4 weeks

4. Do not use any other method e.g. links to Cloud or other file sharing services

Summary

This report represents our assessment of the quality of the areas of performance which were examined during this inspection under the Child Day Care Centres Minimum Standards. The purpose of the inspection is:

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• to satisfy the Department that services are being provided to an acceptable standard and children are being cared for appropriately;
• to provide reassurance for parents;
• to establish that children are safe and take part in activities that contribute to their development and learning;
• to confirm that the provision is consistent with the information held on the register held by the Department and that the registered person is compliant with their conditions of registration;
• to raise standards and promote high quality in the provision of care and learning.

When making judgements, inspectors have regard as to how well the provider meets the Child Day Care Centres Standards, produced by the Department, August 2014. Service providers are required, as part of their conditions of registration, to comply fully with the standards.

This document summarises the inspection findings. The inspection outcomes relate to the Minimum Standards (MS) for Child Day Care Centres.
The report also identifies strengths and areas for improvement and follows the format of the standards. The numbering shown corresponds to that of the standards.

Care providers are expected to comply fully with the Minimum Standards. The Minimum Standards will form the basis for judgements by the Department regarding registration, the imposition and variation of registration conditions and any enforcement action.

Part 1: Service information

Part 2: Descriptors of performance

Part 3: Summary of Inspection Outcomes
Areas of good practice/Feedback from parents
Quality improvements subsequent to the previous inspection
Relationship between staff and children

Part 4: Inspection Outcomes and Evidence and Requirements
For this inspection the Unit has decided to inspect:

Standard 4 - Physical Environment
Standard 6 - Safety
Standard 12 - Working in partnership with parents and carers

In addition the following areas will be considered in each inspection:

Standard 2.5 Organisation
Standard 11.3 Behaviour
Standard 14.1 Individual records of each child

Part 5: Previous Requirements
Requirements and good practice recommendations identified from this Inspection.

Part 6: Provider’s comments and response
## Service Information

**Name of Service:** Sandcastles at Ballacottier  
**Tel No:** (07624) 428244

**Registration number** ROCA/P/0162

**Address:**  
Ballacottier School  
Clybane Road  
Farmhill

**Conditions of Registration**

**Registered Number of Children:**  
The registered person must not look after more than twenty (20) children between 2 ½ - 5 years of age.

(Under Section 65 & 107 (1-4) of the Regulation of Care Act 2013.

**All registered providers of Child Day Care must comply with their conditions of registration as stated on the certificate of registration issued by the Department of Health and Social Care.**

**Brief Description of Service and Services Provided**  
Mrs Hinds took over the lease of the Ballacottier setting in September 2015. It is situated in a large classroom within Ballacottier School, Douglas.

The Registered Manager, Gaynor Connolly left the setting 29 April 2016 and Lisa Lewin is the person in charge until the new manager has been identified.

The setting is composed of a large classroom, children’s toilets, a staff toilet and a storage cupboard that the staff team also use to have their breaks in. All rooms were clean and well maintained. The setting has a designated play area that is fenced and gated to ensure that the children attending the nursery can play safely and separately from the older school children.

**Email Address:**

**Registered person/company:** Lizandal Ltd

**Responsible Person:** Shirley Hinds

**Name of Registered Manager:** Application for proposed manager yet to be submitted

**Registration number** ROCA/M/

**Person in charge at the time of the inspection:** Lisa Lewin

**Date of latest registration certificate:** 7 September 2015

**Assessed risk level of service:**

**Pre-inspection:** Not applicable  
**Post-inspection:** Low
Date of any additional regulatory action: None

Date of previous inspection: First since registration

Days open: Monday to Friday (term time only)

No of children at the time of the inspection: 12

Number of staff present during the inspection: Two

Name of Inspector(s) Becci Réa
Descriptors of Performance against Standards

Inspection reports will describe how a service has performed in each of the standards inspected. Compliance statements by inspectors will follow the framework as set out below.

**Compliant**
Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken. In most situations this will result in an area of good practice being identified and comment being made.

Recommendations based on best practice, relevant research or recognised sources may be made by the inspector. They promote current good practice and when adopted by the registered person will serve to enhance quality and service delivery.

**Substantially compliant**
Arrangements for compliance were demonstrated during the inspection yet some criteria were not yet in place. In most situations this will result in a requirement being made.

**Partially compliant**
Compliance could not be demonstrated by the date of the inspection. Appropriate systems for regular monitoring, review and revision were not yet in place. However, the service could demonstrate acknowledgement of this and a convincing plan for full compliance. In most situations this will result in requirements being made.

**Non-compliant**
Compliance could not be demonstrated by the date of the inspection. This will result in a requirement being made.

**Not assessed**
Assessment could not be carried out during the inspection due to certain factors not being available.
Summary of Inspection

This is an overview of what the inspector found at the time of the inspection.

The purpose of this inspection was to:

- Check the service’s level of compliance with standards and regulations as set out in part 4.

Lisa Lewin has only been at the setting a short time as she is covering the recent departure of the setting’s manager prior to the registration of a new manager.

Areas of good practice / Feedback from parents:
- The premises we re bright, cheerful and welcoming and there are many boards displaying the children’s pictures and works of art.
- There was a wide variety of toys, equipment and materials for the children.
- The inspector observed a very good working relationship and rapport between both staff members and this contributed toward the happy, relaxed atmosphere in the nursery.

Quality improvements subsequent to the previous inspection:
All the requirements made during the registration inspection were implemented prior to the setting’s registration being granted.

Areas for improvement
Mrs Hinds must ensure that the previous manager submits the required documentation in order to surrender her registration and that the proposed manager submits the required application and fee in order to be registered.

Relationship between staff and children:
The inspector observed a very good relationship between the staff team and the children. The children seemed relaxed and very much at home in the setting. The setting recently underwent a change of person in charge as the manager left the nursery but the children did not seem unsettled by the changes and, after observing the two staff members, the inspector feels their good working relationship and consistent approach would have helped the children to accept the changes.
## Regulation of Care Act 2013, Part 2 (37) and Care Services Regulations Part 3 (9)

### Standard 4 - Physical Environment

| OUTCOME: |
The premises are safe, secure and suitable for their purpose. They provide adequate space in an appropriate location, are welcoming to children and offer access to the necessary facilities for a range of activities which promote their development. |

| Our decision: |
| Substantially compliant |

| Reasons for our decision |
The nursery is situated in a self-contained classroom set in Ballacottier School and this was the first inspection under the new providers. The premises were welcoming and friendly to children and their families. The playroom and toilets were well maintained, clean and in a very good state of repair. There was sufficient equipment available to meet the needs of all the children attending. The main playroom was laid out to ensure there could be free movement around the activities provided and all areas of learning had been accommodated. There was adequate storage throughout the area. There were three toilets and four hand sinks available for the children’s use. They were clean and in good condition. There was a separate toilet for adults to use. Room temperatures were found to be above the minimum requirement of 18°C. The nursery had a large, well-equipped and secure outside play area that enabled the children to enjoy playing outside and the benefits that brings. It was covered with an impact absorbent covering as well as a grassed slope that was observed to be quite popular with many children. The inspector observed children playing with an assortment of play equipment and enjoying the freedom of being outside. Actions need to be taken in regards to the fencing as some sections were observed to be in a poor state of repair. There were some large splinters as well as chipped and peeling paint – all at child height. The inspector also noticed some rotted wood at the top of the fence posts that either needs removing or replacing. There was an area at the premises where information was stored and where parents could meet and talk to staff confidentially. There were adequate arrangements in place in regards to ensuring the staff team can have a break away from the children. |

| Requirements and recommendations |

**Standard 4.13**
Outdoor play space is safe, secure and well maintained. To be actioned by 30 June 2016

| Provider’s action plan |
The D.O.E Infrastructure team have been and repaired damaged parts of the fence, the contractor is going to paint the fence as soon as possible. |
**Regulation of Care Act 2013, Part 2 (37) and Care Services Regulations Part 3 (9)**

**Standard 6 - Safety**

**OUTCOME:**
The registered person takes positive steps to promote safety within the setting and on outings and ensures proper precautions are taken to prevent accidents.

**Our decision:**
Substantially compliant

**Reasons for our decision**
There were written risk assessments available for inspection. All were comprehensive and included a review date. The Registered Manager was due to carry out a review in March 2016 but as she has now left the setting the review has not been carried out. This was discussed with the interim person in charge.

There were good security measures in place to ensure that the staff team were able to prevent unauthorised access into the setting. Children could not gain access to window openings and there was a visitor’s book and the staff team were diligent in ensuring all visitors have signed in.

The hot water temperatures were checked and were safe for the children to use as they were found to be below 43°C.

Both COSHH and RIDDOR information was clearly displayed in the playroom.

All electrical sockets were either covered or in use.

There was evidence to show that annual portable appliance testing has taken place on all but one electrical appliance in the nursery. The sticker on the CD player showed that it had not been tested when the other equipment was checked and it needs to be rectified to ensure it is safe for use.

There was a bramble type shrub growing through the bottom of the fencing. This needs to be removed to ensure children do not hurt themselves on the thorns.

There was a small storage unit in the outdoor play area. The provider must ensure the unit is secure in order to prevent children gaining access.

The caretaker from the school carries out the testing on the fire alarm system and emergency lighting and arrangements are in place to ensure the nursery has their own written record of all the tests. The fire log book showed that the emergency lighting and fire alarm tests were not up to date. Lighting must be tested monthly and the last recorded test was 11 February 2016. Fire alarms should be tested on a weekly basis and the last recorded test was 13 May 2016.

There was evidence available to show that an annual check had been carried out on the fire alarm system 13 August 2015 by a reputable island based company.

All exits were clear and there were a number of fire notices displayed throughout the setting. This ensured everyone was aware of the evacuation procedure so that the children could be safely escorted from the building should the need arise.

There was current Public Liability insurance in place and the certificate was clearly displayed. The Registered Person has ensured the insurance covers the setting in the circumstance of a child/ren suffering harm whilst being cared for at the nursery. There was appropriate employer insurance in...
place.

The nursery does not take the children on outings at the present time.

### Requirements and recommendations

**Standard 6.2**
A review of the setting’s risk assessments must be carried out to ensure all information is up to date. **To be actioned by 30 June 2016**

**Standard 6.9**
The CD player must undergo a portable appliance test (PAT) to ensure is it safe to use. **To be actioned by 30 June 2016**

**Standard 6.16**
The registered person must ensure that hazardous outdoor plants are removed or made inaccessible to the children **Immediate action required**

**Standard 6.19**
The outside storage unit must be made inaccessible to the children **Immediate action required**

**Standard 6.21**
The fire alarm system to be maintained (and recorded) as per instructions stated in the Fire Safety Log Book **To be actioned by 30 June 2016**

### Provider’s action plan

6.2 The risk assessments have been reviewed and are now going to be reviewed every 12 months, not 6 months.

6.9 We have contacted an electrician to get the CD player PAT tested as soon as possible.

6.16 The hazardous outdoor plants have been removed.

6.19 A padlock has been purchased for the storage unit.

6.21 The caretaker had done the fire alarm tests but had not recorded them in our nursery copies. Mrs Hinds has spoken to him and made him aware of the importance that our records must be up to date (he has now completed our copies to make them up to date). The lighting system is checked by the board of education quarterly. Mrs Hinds is currently liaising with Mark Caley (fire officer) to decide if it is acceptable for this timescale as we are renting the premises, and as landlords, it is the School’s responsibility for certain checks.
<table>
<thead>
<tr>
<th>Regulation of Care Act 2013, Part 2 (37) and Care Services Regulations Part 3 (9)</th>
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<tbody>
<tr>
<td>Standard 12 - Working in partnership with parents and carers</td>
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</table>

**OUTCOME:**  
The registered person and staff work in partnership with parents to meet the needs of the children, both individually and as a group. Information is shared.

**Our decision:**  
Substantially compliant

**Reasons for our decision**  
The setting have written and submitted a Statement of Purpose. The document must be reviewed and amended to reflect the recent changes at the setting such as the Registered Manager leaving and an interim person in charge being in situ and the address change for the Registration and Inspection Unit on the included complaints procedure. The registered person must ensure the document is made available to the parents as on the day of inspection neither the staff team nor the inspector could find it.

Parents have access to the policies and procedures for the setting. Although these were not examined in full during this inspection it was noticed that some needed to be reviewed to ensure they contain current information. The Child Protection policy states the age range cared for as '18mths – 11 years' which is not the case at this setting.

The inspector understands that the nursery is one of a number of child care settings owned by Lizandal Ltd therefore many of the policies are generic under the 'Sandcastles' umbrella but some should be specific to each individual setting.

Parents have the opportunity to see samples of their children’s work on a regular basis as the staff team display the children’s art work and photos throughout the premises. There was also information in regards to the activities being provided for the children.

There was evidence to demonstrate that the staff team are working in partnership with parents and other agencies to ensure the individual needs of the children are being met.

To ensure the safe collection of the children attending the nursery, the staff team only release the children to named persons. There was a policy available that explained the arrangements in place for the safe arrival and departure of the children.

**Requirements and recommendations**

**Standard 12.1**  
The Statement of Purpose to be reviewed to ensure all information is up to date and made available to the parents. **To be actioned by 30 June 2016**

**Standard 12.1 and 14.9**  
The registered person must review the setting's policies to ensure they contain up to date and
relevant information. The reviewed policies must be made available to the parents. **To be actioned by 15 July 2016**

<table>
<thead>
<tr>
<th>Provider’s action plan</th>
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<tbody>
<tr>
<td>12.1 An updated Statement of Purpose has been put on display in the setting.</td>
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<td>12.1 and 14.9 Mrs Hinds has updated the settings policies to ensure they contain the appropriate information for the individual setting.</td>
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### Regulation of Care Act 2013, Part 2 (37) and Care Services Regulations Part 3 (9)  
**Standard 2.5 Organisation**

<table>
<thead>
<tr>
<th>Criteria</th>
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<tr>
<td>Accessible individual records are kept on the premises containing the name and address of the staff members or volunteers and which retain information about recruitment, training and qualifications.</td>
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<th>Our decision:</th>
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<tr>
<td>Compliant</td>
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<tr>
<th>Reasons for our decision</th>
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<tr>
<td>Examination of the staff records showed that all required information was included and the relevant checks have been carried out.</td>
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<thead>
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<th>Requirements and recommendations</th>
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<th>Provider’s action plan</th>
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<tr>
<td>Not applicable</td>
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### Regulation of Care Act 2013, Part 2 (37) and Care Services Regulations Part 3 (9)
#### Standard 11.3 - Behaviour

<table>
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<th>Criteria</th>
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<tbody>
<tr>
<td>Adult handling of behaviour is consistent and developmentally appropriate, respecting individual children’s level of understanding and maturity.</td>
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<tr>
<th>Reasons for our decision</th>
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<tr>
<td>The staff team were seen to be consistent in their approach to managing behaviour. They were observed giving praise and encouragement to the children throughout the inspection. Staff used non-verbal gestures to reinforce the comments they gave and the children were seen responding positively to requests made to them.</td>
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<tr>
<td>Throughout the inspection the children were extremely well behaved and were observed playing co-operatively with each other.</td>
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<table>
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<tr>
<th>Requirements and recommendations</th>
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<tr>
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</tr>
<tr>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Standard 14.1 - Individual Records of Each Child</td>
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**Criteria**

Individual records of each child containing:

- their full name and address;
- their date of birth;
- their photograph;
- contacts in the case of an emergency;
- GP contact;
- authorisation for outings and travel in vehicles and other appropriate permissions and parental consents;
- details of who will collect the child, including photographs where appropriate;
- known medical conditions;
- dietary requirements and preferences;
- any social, emotional and/or behavioural needs;
- first language/any additional languages spoken;
- any other cultural needs.

**Our decision:**

Compliant

**Reasons for our decision**

There was a record for each child attending the setting. A sample of children’s records was examined during the inspection and the forms used were observed to contain all the required information.

**Requirements and recommendations**

None

**Provider’s action plan**

Not applicable
Other areas identified during this inspection / Or previous requirements which have not been met

**Standard 14.2**
There were completed accident forms in some of the children’s records. It was noticed that they had not been completed in full and this was discussed with the person in charge. Some of the forms did not have the child’s date of birth recorded and one child had two accident forms both with separate dates of birth recorded. The person in charge stated she will review the children’s records to ensure all information has been included and is correct.  
**To be actioned by 30 June 2016**

**Standard 2.1**
Staff deployment must be included in the displayed written activity plans to enable the parents to see what adult is carrying out a particular activity  
**To be actioned with immediate effect**

**Standard 14.6**
When looking at the staff files, the inspector noticed that some paperwork had been photocopied and kept on file. To ensure the requirements of the Data Protection Act 2002 are being met, the registered provider must ensure that copies of identification such as passports, drivers licence etc. are not kept on record. The document number and the date seen should be recorded and the original document returned to the staff member.  
**To be actioned with immediate effect**

**Regulation 78 (1)**
The Responsible Person must ensure the previous manager submits the required documentation in order to surrender her registration.  
**To be actioned with immediate effect**

**Regulation 66 (2) (a)**
The proposed registered manager must submit an application to become the registered manager for the service.  
**To be actioned with immediate effect**

14.2 All staff have been made aware of the importance of the accident forms being filled in properly. The manageress has already reviewed the children’s records.  
2.1 We have added the staff names to our activity plans.  
14.6 All staff records that have photocopied I.D in their files have been returned or shredded.  
78 Mrs Hinds has been informed by the previous manager that she has sent the relevant information via email to Jenny Percival.  
66 Lisa Lewin manager application form has now been submitted.
Requirements from previous requirements

Identified below are requirements made at previous inspections under the Regulation of Care Act 2013, Regulations and Care Standards and progress to date:

<table>
<thead>
<tr>
<th>No</th>
<th>Regulations/Standards</th>
<th>Requirement/date for compliance</th>
<th>Met/not met</th>
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<td></td>
<td>None</td>
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</table>

Good practice recommendations from previous inspections

Identified below are recommendations made at previous inspections under Regulation of Care Act 2013 and progress to date:

<table>
<thead>
<tr>
<th>No</th>
<th>Standard</th>
<th>Recommendations</th>
<th>Met/not met</th>
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<tr>
<td></td>
<td>None</td>
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</table>

Please complete the provider action plan sections beneath each requirements and recommendation sections providing details of action taken (or to be taken) with timescale for each.

The inspector would like to thank the management, staff and service users for their co-operation with this inspection.

If you would like to discuss any of the issues mentioned in this report please do not hesitate to contact the Registration and Inspection Unit.

Inspector: Becci Réa

Date: 2 June 2016
Provider’s comments / response

To: The Registration and Inspection Unit, 3rd Floor, Murray House, Mount Havelock, Douglas IM1 2SF

From: Shirley Hinds and Lisa Lewin

I / we have read the inspection report for the unannounced inspection carried out on 27 May 2016 at the establishment known as Sandcastles at Ballacottier, and confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s).

☒ I/we agree to comply with the requirements/recommendations within the timescales as stated in this report.

Please return the whole report which includes the completed action sections to the Registration and Inspection Unit within 4 weeks from the receiving the report.

Or

☐ I/we am/are unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s)

State any factual inaccuracies found:

n/a

Signed
Acting Manager Lisa Lewin

Print name Lisa Lewin

Date 28/06/16

Signed
Responsible person Shirley Hinds

Date 28/06/16

Action plan/provider’s response noted and approved by Inspector:

Date: 04/08/2016 Signature/initials Becci Réa