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# Healthy and Sustainable Pre-School Scheme National Awards Criteria

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Welsh Network of Healthy School Schemes



Cynlluniau Ysgolion Iach - Rhwydwaith Cymru





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# Healthy and Sustainable Pre-School Scheme National Award Criteria

## Introduction

### The National Policy Context

Since 2004, the Welsh Assembly Government has based its policy for children and young people on the UN Convention on the Rights of the Child (UNCRC). Planning and delivery of services for children and young people in Wales is undertaken in the context of the Seven Core Aims for Children and Young People, based on the UNCRC:

- Aim 1:** Have a Flying Start in life and the best possible basis for their future growth and development (Articles 3, 29 and 36)
- Aim 2:** Have access to a comprehensive range of education, training and learning opportunities, including acquisition of essential personal and social skills (Articles 23, 28, 29 and 32)
- Aim 3:** Enjoying the best possible physical and mental, social and emotional health including freedom from abuse, victimisation and exploitation (Articles 6, 18-20, 24, 26-29, 32-35, 37 and 40)
- Aim 4:** Have access to play, leisure, sporting and cultural activities (Articles 15, 20, 29 and 31)
- Aim 5:** Are listened to, treated with respect, and have their race and cultural identity recognised (Articles 2, 7, 8, 12-17 and 20)
- Aim 6:** Have a safe home and a community which supports physical and emotional well-being (Articles 19, 20, 25, 27, 32-35)
- Aim 7:** Are not disadvantaged by child poverty (Articles 6, 26, 27 and 28)

### In respect of the Healthy and Sustainable Pre-School Scheme, of particular relevance are UNCRC Articles:

**Article 12:** Children have the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously

**Article 23:** Children with a disability have the right to live a full and decent life with dignity, and as far as possible, independence and to play an active part in the community

**Article 24:** Children have a right to the best possible health, and to be provided with health care, nutritious food, a clean environment and health and well-being education

**Article 31:** Children have a right to relax and play and join in a wide range of cultural and artistic activities



## **Health issues are also a key element of sustainable development, and it is hoped that linking health issues and environmental sustainability issues will enable settings to develop a better understanding of sustainable development.**

### Healthy and Sustainable Pre-School Scheme

The Healthy and Sustainable Pre-School Scheme (HSPSS) was launched nationally in 2011 for all childcare settings in Wales as an extension of the Welsh Network of Healthy School Schemes (WNHSS).

The WNHSS launched in 1999 following a two-year pilot programme as part of the World Health Organisation / European Commission / Council of Europe initiative – the European Network of Health Promoting Schools. The Scheme was developed following recommendations from a Task and Finish Group and with the aim to ensure that local healthy school schemes were established in health and education partnerships in each local authority area in Wales.

The HSPSS, alongside the WNHSS, is delivered in all local authority areas in Wales. Each scheme employs one or more healthy Pre-Schools coordinators who recruit and support settings to embed a whole setting approach to health and well-being. This can include direct support to the setting as well as training and accreditation. The childcare setting will appoint their own lead, who will work with the HSPSS coordinator to plan and implement actions identified. As the settings progress through the scheme, health-improvement measures are expected to be embedded within the day-to-day culture and ethos of the setting to make a lasting difference.

The HSPSS Criteria has clear indicators for four consistent aspects of practice:

Leadership and Communication, Planning and Delivery, Ethos and Environment, and Family and Community Involvement.

These are considered during a Preliminary phase and then across seven thematic aspects:

- Nutrition and Oral Health
- Physical Activity and Active Play
- Emotional and Mental Well-being including Relationships
- Environment
- Safety
- Hygiene
- Workplace Health and Well-being

#### What we mean by sustainable in this context?

The use of the word sustainable in the title of the Healthy and Sustainable Pre-School Scheme reflects our commitment to sustainable development. In Wales, sustainable development means enhancing the economic, social and environmental well-being of people and communities, achieving a better quality of life for our own and future generations. The Welsh Government Well-being of Future Generations Act, 2015, sets out seven well-being goals, including a healthier Wales and a more equal Wales.



## Links to other Programmes and Organisations

### Curriculum for Wales (and guidance for non-maintained nursery settings)

High-quality nursery education provision is essential to a child's development. The experiences, knowledge and skills needed for lifelong learning, active citizenship and future employment begin in the early years. The Curriculum for Wales for maintained childcare settings aspires to create in children, positive dispositions towards learning which, if nurtured, will last a lifetime and provide the firm foundation which all children need to support them in realising the four purposes of The Curriculum for Wales; that all our children and young people will be:

- Ambitious, capable learners, ready to learn throughout their lives
- Enterprising, creative contributors, ready to play a full part in life and work
- Ethically, informed citizens of Wales and the world
- Healthy and confident individuals, ready to lead fulfilling lives as valuable members of society

The Curriculum for Wales has also been developed for funded non-maintained nursery settings to adopt. Settings which choose to adopt this curriculum should use it in its entirety to support effective planning to ensure the provision of a developmentally appropriate curriculum for the youngest learners.

The HSPSS supports and complements the basic principles and learning of the curriculum for Wales by contributing to the developmental pathways below:

- belonging
- communication
- exploration
- physical development
- well-being



## Flying Start

Flying Start is the Welsh Government's targeted Early Years programme for families with children under 4-years of age. The core elements of the programme have been shown to influence positive outcomes for children and their families. The Healthy and Sustainable Pre-School Scheme supports the basic principles and learning framework for Flying Start by contributing to quality childcare provision; social and emotional development of children, physical health of children, supporting parents and the community, it can also contribute to general assessment and reporting.

## Care Inspectorate Wales (CIW)

Care Inspectorate Wales (CIW) is the independent regulator of social care and childcare in Wales. CIW regulates and inspects pre- school setting provision using the National Minimum Standards for Regulated Childcare for children up to the age of 12, which links to the whole programme of HSPSS.

## National Minimum Standards for Regulated Childcare for children up to the age of 12 Years (NMS)

Regulated childcare encompasses a wide range of different types of provision which are subject to a set of national minimum standards. All registered childcare providers must have regard to the NMS, which focus on securing positive outcomes for children under twelve and reducing risks to their welfare and safety. HSPSS supports the NMS by aiming to improve the quality of health and well-being in pre- school settings: [www.gov.wales/sites/default/files/publications/2023-05/national-minimum-standards-for-regulated-childcare\\_0.pdf](http://www.gov.wales/sites/default/files/publications/2023-05/national-minimum-standards-for-regulated-childcare_0.pdf)

## Early Years Wales

Early Years Wales supports parents and families to participate in their children's development, they encourage an integrated approach to education and childcare for all children aged 0-5 years.

This approach is aligned with the aspect of Emotional and Mental Well-being, including Relationships, which focuses on the holistic development of babies and young children, their social, emotional, cognitive and physical development to support well-being and lifelong learning.

## ESTYN

Have indicated that this scheme provides a framework for use by pre-school settings to evaluate their provision for promoting the health and well-being of children and staff.

## Designed to Smile

Designed to Smile is a national oral health improvement programme to improve the dental health of children in Wales.

The nutrition and oral health aspect of the HSPSS reflects a whole setting approach to ensure good practice in relation into oral health in line with the Design to Smile programme: [www.phw.nhs.wales/services-and-teams/created-to-smile](http://www.phw.nhs.wales/services-and-teams/created-to-smile)

## Healthy Working Wales

The Healthy Working Wales digitally led programme aims to support and encourage employers to create healthy and safe working environments, take action to improve the health and well-being of their staff, manage sickness absence well and engage with employees effectively, all of which can help to achieve a range of positive business and or organisational outcomes. The Healthy Working Wales Website contains information, guidance and tools on a wide range of issues relating to healthy work environments, healthy lifestyles at work, and employees with health needs. The content can support HSPSS settings with the Healthy Workplace aspect of the scheme: [www.phw.nhs.wales/services-and-teams/healthy-working-wales](http://www.phw.nhs.wales/services-and-teams/healthy-working-wales)



## How will the Scheme be implemented?

The Healthy Pre-School Scheme is implemented and accredited in stages called 'phases'. Each phase lasts approximately one year. Settings must work to develop and promote the 8 specific action areas of the scheme.

**Preliminary Phase** A whole setting approach involves planning health programmes that are coordinated, comprehensive and progressive, benefitting the whole setting community.

**Nutrition and Oral Health** Reflecting a whole setting approach to food, nutrition and oral health, incorporating the promotion of a healthy balanced diet based on current national guidance and good practice in relation to oral health.

**Physical Activity / Active Play** Settings will support and promote a wide range of accessible physical activities and active play for children and staff including access to play environments and experiences that meet the developmental needs of children.

### **Emotional and Mental Well-being including Relationships**

Reflecting the ethos of the setting which should encourage mutual respect and promote the mental and emotional well-being, in the broadest sense, of all those who work within it. It also highlights the importance of the development of positive relationships and therefore covers some aspects of personal development. Application of the preliminary aspect and the Emotional and Mental Well-being including relationships aspect will support settings to meet their duties under the statutory framework for embedding a whole school approach to emotional and mental well-being.

<https://www.gov.wales/sites/default/files/publications/2021-03/framework-on-embedding-a-whole-school-approach-to-emotional-and-mental-well-being.pdf>

**Environment** Settings will promote a safe, stimulating environment which reflects the importance of the people within it, with an emphasis on caring for the environment within and outside of the setting.

**Safety** Settings will reflect a proactive approach to all aspects of safety including work on all substances. It should be recognised that the parents and staff use of alcohol and illegal substances could affect the safety of the children in the setting. Smoking is also included in this section but should be considered as a health issue and not just a safety issue. Some aspects of safety are statutory for example safeguarding, health and safety and whilst reference is made to these they will need to be considered separately in more detail. Immunisation is also covered here as a safety issue. Keeping records of immunisation is good practice which is useful in the event of an outbreak.

**Hygiene** Through this aspect settings will reflect on good hygiene, as it is crucially important to early years settings. A whole setting approach is essential, with strong leadership, to minimise or prevent communicable diseases and their spread and to promote good infection prevention and control practices for staff, children and their families.

**Workplace Health and Well-being** Promoting workplace with a commitment to the health and well-being of all staff. Good work is important for physical and mental health and well-being. Employers who adopt good working practices will have a happy, healthy and productive workforce, with lower levels of absence.



## Action planning

An action is not a one-off activity. It is a planned piece of work that will move the setting forward as a health promoting setting. It is helpful to remember that actions should be:

- Specific
- Measurable
- Achievable
- Realistic
- Time Frame

All actions should be implemented with the following principles in mind:

- There should be a supportive management structure in place within the setting
- Parents / carers and children (whenever possible) should be fully consulted and involved wherever actions affect them
- All actions should involve a whole setting approach

## Implementation

The implementation of action plans should happen over an agreed and realistic timeframe. All actions will need to be monitored and evaluated to understand their impact and support further planning and activity. Monitoring impact will also help you to demonstrate how each assessment question has been met.

## Monitoring

The coordinator will continuously monitor each setting. This could be through pre-arranged setting visits or at network meetings.

## Evidence

Throughout each phase of the scheme, all settings will be asked to compile relevant evidence, demonstrating how actions and requirements from each aspect have been successfully embedded. The coordinator will provide settings with support in doing this and advises that settings continually collect evidence of all types of activity being undertaken throughout the phase. Each assessment question must be addressed with at least one piece of evidence being available during accreditation. Evidence can be:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps and social media, setting website, meeting notes, extracts from reports.
- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.
- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Evaluation

To demonstrate the positive impact of initiatives and activities introduced, it is important that settings evaluate activities and provide evidence of this evaluation as part of their portfolio of evidence. This will help the setting to further develop and continually improve.

Methods of evaluation could include:

- Collecting opinions, before and after an event or activity
- Questionnaires
- A discussion group or informal interviews
- Before and after observations
- Staff/management reflections on practice
- Measuring children's participation in activities

## Working Together

Settings are strongly encouraged to make contact with other settings who are working towards accreditation for extra support. It is also recommended that settings link with their early years and childcare officers for support, advice and guidance as and when needed as well as seeking support from within the setting community.

## Accreditation

At the end of each phase of the scheme a setting will be recommended for accreditation and will be assessed by the Healthy Pre-Schools Coordinators providing there is sufficient evidence to show that each of the assessment questions within the phase have been achieved.

Accreditation is an exciting and important part of the process where settings receive congratulations and official recognition of the work they have undertaken. It provides a great opportunity to share your success with the setting community and communicate your commitment to health and well-being.

A Healthy and Sustainable Pre-School setting is one which, not only works towards accreditation, but embeds and embraces health and well-being within its day-to-day life. Re-accreditation takes place every two years.



## Aims

- To promote actively the development of the positive self-esteem of all members of the pre-school setting community
- To actively develop good relationships in the daily life of the pre- school setting
- To identify, develop and communicate a positive ethos which promotes respect towards all, and a positive approach to health, the environment and the community
- To ensure that all children have the opportunity to benefit from stimulating challenges and the right to play
- To take every opportunity to enhance the environment of the pre-school setting
- To develop good setting/home/community links and shared activities
- To ensure that all children's emotional well-being is fostered as early as possible
- To develop and implement coherent health activities and experiences
- To establish good links with associated settings and schools to ensure smooth transition
- To develop the setting as a health promoting workplace with a commitment to the health and well-being of all staff
- To develop consistent complementary policies and practice which reflect a positive approach to health and the environment
- To develop partnerships with appropriate outside agencies and individuals for advice, and active support for health promotion and planning in the setting
- To ensure all children in the care of the setting have their rights respected
- To ensure all children feel safe, happy and supported
- To ensure staff feel empowered to offer advice and relevant support in relation to health and well-being



The image features a teal background with a horizontal line that divides the space into two sections. The top section is a lighter shade of teal, while the bottom section is a darker shade. Overlaid on this background are several stylized, dark teal outlines of leaves or petals, arranged in a symmetrical, branching pattern. The text "PRELIMINARY PHASE" is positioned in the lower-left quadrant, centered vertically between the horizontal line and the bottom edge of the image.

**PRELIMINARY PHASE**



## Preliminary Phase

This section reflects the importance of a coordinated, comprehensive and progressive approach to the health and well-being of children and staff which involves the whole setting community. All the assessment questions in this section need to be in place to provide a framework to address the health aspects which follow and should be addressed in conjunction with each section.

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Minimum Requirements

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	Does the Healthy and Sustainable Pre-School Scheme (HPSS) have the full support of setting leadership to enable a whole setting approach and whole staff involvement?	<ul style="list-style-type: none"> <li>• Local scheme sign-up form</li> <li>• Healthy and Sustainable Pre-School Scheme on staff meeting agenda</li> <li>• HSPSS forms part of staff induction</li> </ul>		
1.2	Does the setting have a designated scheme coordinator, whose key responsibilities are defined, who will work with the local co-ordinator, supported where appropriate by other members of staff?			
1.3	Has the setting undertaken a review of health, well-being and sustainability activities to celebrate and build on good practice and to identify areas for further development?	<ul style="list-style-type: none"> <li>• Review of health activities and action plan</li> </ul>		



1.4	How has the setting considered local health priorities/issues within the health and well-being planning?	<p>Setting can evidence how they have considered local priorities for example:</p> <ul style="list-style-type: none"> <li>• Spoken with local public health partners</li> <li>• Reviewed local health strategies</li> <li>• Reviewed local child health data</li> </ul>		
1.5	How has the setting worked in partnership with other agencies to support health and well-being?	<ul style="list-style-type: none"> <li>• Local Authority (for example educational psychologist, additional learning needs officer)</li> <li>• Health services and agencies (for example health visitor, dietetics, speech and language, health protection team)</li> <li>• Health improvement programmes/ initiatives (for example Designed to Smile, Sports Development, Healthy Working Wales)</li> </ul>		
1.6	What health and health promotion information do you include in your welcome packs for parents/carers?	<ul style="list-style-type: none"> <li>• Registration information for local health care services (for example doctors, health visiting, dentist and optician)</li> <li>• Health information (for example childhood immunisations, exclusion periods for common infections, information about Healthy Start vouchers)</li> </ul>		



		<ul style="list-style-type: none"> <li>• Health policies promoted by the setting (for example the smokefree premises policy)</li> <li>• Examples of other information provided could include safety information, nutrition advice, resources or guidance, physical activity advice, resources or guidance</li> <li>• Registration with doctors, health visitor, dentist, optician</li> </ul>		
1.7	How does your setting make a strong statement about the importance of health and well-being and how do you notify parents/carers about your involvement in the Healthy and Sustainable Pre-School Scheme and the importance of health and well-being?	<ul style="list-style-type: none"> <li>• Welcome pack</li> <li>• Mission statement/purpose</li> <li>• Aims/vision</li> <li>• Newsletters, apps, social media</li> </ul>		
1.8	Have all staff received statutory training on safeguarding?	<ul style="list-style-type: none"> <li>• Wales Safeguarding Procedures</li> <li>• Certification of training</li> </ul>		

1.9	Have all staff received information on vaccine preventable diseases and recommended immunisations for children and staff?	<ul style="list-style-type: none"><li>• Childhood routine immunisation schedule shared with staff</li><li>• Credible sources of information regarding vaccine preventable diseases shared with staff</li><li>• Staff training from local health partners</li></ul>		
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1.10	What plans, procedures and/ or policies are in place to promote equity and inclusion and avoid stereotyping or discrimination?	<ul style="list-style-type: none"> <li>• Equality action plan</li> <li>• Policies developed and reviewed in relation to equal opportunities, additional learning needs, additional health needs</li> <li>• Behaviour policy explicitly considers bullying and discrimination on the grounds of protected characteristics</li> <li>• Setting can describe how they work within the principles of a Children’s Rights Approach in line with the United Nations Convention on the rights of the child (UNCRC) and/or Children in Wales rights in early years</li> </ul>		
1.11	How does your setting contribute to a local and national understanding of health and well-being through the completion of relevant data and sharing of information?	<ul style="list-style-type: none"> <li>• Provides complete and accurate data-sets as required by the local authority, delivery and funding partners (in line with GDPR)</li> <li>• Participates in local/national data collection activities</li> <li>• Participates in research activities (where appropriate)</li> </ul>		

**Desirable Considerations:**

2.1	Does your setting keep record of immunisation status of all children and staff?	<ul style="list-style-type: none"> <li>• Admission forms for children</li> <li>• Staff induction and enrolment</li> </ul>		
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A large, stylized graphic of a leaf or plant branch, rendered in a light olive green color, spans the background of the slide. The graphic consists of several overlapping, teardrop-shaped leaf outlines with thick, rounded borders. The central text is positioned over the middle of this graphic.

# **NUTRITION AND ORAL HEALTH**



## Nutrition and Oral Health

**This section reflects a whole setting approach to food, nutrition and oral health. It includes the promotion of a healthy balance diet based on current national guidance and good practice in oral health.**

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Leadership and Communication

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	What policies do you have in place, which are regularly reviewed and updated, to guide your work on nutrition and oral health and special diet provision?	Food/ nutrition policy in place which is in line with Food and Nutrition for Childcare, Best Practice Guidance and includes: <ul style="list-style-type: none"> <li>• Meal, snack and drink provision</li> <li>• Healthy packed lunch promotion</li> <li>• Provision for special diets</li> <li>• Food for celebrations, outings and food brought in</li> <li>• Allergy information</li> <li>• The eating environment</li> <li>• Use of dummy policy</li> <li>• Identified responsible lead for nutrition within the setting</li> <li>• Designed to Smile protocol (where eligible) or oral health policy</li> </ul>		
1.2	What nutrition and oral health training have staff received and how has this influenced practice?	<ul style="list-style-type: none"> <li>• Agored Cymru Community Food and Nutrition Skills for Early Years Level 2</li> <li>• Local healthy snack training</li> <li>• Local food, nutrition and cooking skills training</li> <li>• Food Safety training</li> <li>• Designed to Smile training</li> <li>• Evidence of practice</li> </ul>		



## Planning & Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What activities and experiences do you provide that involve children in making decisions about healthy food choices and trying new foods?	<ul style="list-style-type: none"> <li>• Offer variety of healthy snacks consistent with the current guidance</li> <li>• Positive reinforcement for children who try them</li> <li>• Smell touch and taste games with appropriate foods from the food groups (for example feely games)</li> <li>• Provide opportunities for authentic and familiar role play (for example growing, cooking and shopping healthy and sustainable foods)</li> <li>• Involve children in helping to prepare and serve healthy meals and snacks</li> <li>• Food themed stories, songs, books, jigsaws and celebrations</li> <li>• Growing of fruit and vegetables</li> <li>• Learning about the importance of a balanced diet</li> <li>• Encourage children to develop knowledge about their culture, community, society and the world (for example trying food and recipes from different cultures)</li> </ul>		



2.2	How do you incorporate dental/oral health promotion and dental hygiene into the life of the setting and staff?	<ul style="list-style-type: none"><li>• If eligible, participation in the Designed to Smile supervised tooth brushing programme, including meeting its required standard</li><li>• Age-appropriate activities that help children learn about good oral health (for example teeth brushing activities, role play dentist visit)</li><li>• Facilitate a “people who help us” dentist or dental nurse visit</li><li>• Free flow cups from six months</li><li>• Lidless cups from twelve months</li><li>• Tooth friendly snacks and drinks</li></ul>		
2.3	How do you encourage healthy cooking skills?	<ul style="list-style-type: none"><li>• Children help prepare and serve their own snack</li><li>• Planned cooking activities for children (for example making dough, preparing fruit and vegetables, basic food preparation)</li><li>• Celebration food/cooking (for example leek and potato soup on St David’s Day)</li><li>• Grow and cook vegetables grown in the garden with children</li><li>• Explore and try healthy foods from around the world</li></ul>		



2.4	What local/national initiatives are you involved in that promote the nutrition and oral health of children or parents/carers?	<ul style="list-style-type: none"><li>• Designed to Smile (where eligible)</li><li>• Local food and nutrition training, programmes or initiatives</li><li>• Local healthy snack award</li></ul>		
2.5	How do you ensure consistent messages are provided/mixed messages are avoided in relation to food and health across the whole setting? This includes ensuring the food and drink provided within the setting is consistent with intended learning	<ul style="list-style-type: none"><li>• Staff eat with children and role-model healthy eating behaviours</li><li>• Food is not used as a reward within the setting</li><li>• Avoid the influence of promotional campaigns and branded products that conflict with healthy messages</li><li>• Consistency across all food and drink provision (for example parties, celebrations, food and play activities, food brought in)</li><li>• Incorporate the wider environment in the food policy (for example food on trips and during out of setting activities)</li></ul>		



Ethos & Environment				
	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	How do you create an environment that promotes healthy eating and drinking as a pleasurable experience, and how do you involve the children?	<ul style="list-style-type: none"> <li>• Parent/carer questionnaires for views about food provision</li> <li>• Staff meetings to discuss food provision and healthy eating activities</li> <li>• Child initiated planning for food activities. Includes food tasting, sad/ smiley faces for food preferences</li> <li>• Children and staff eat snacks and meals together at the table</li> <li>• Snack and lunch/tea times are pleasurable, social experiences</li> <li>• Praise and/or reward children with positive behaviour at eating time</li> <li>• Allocate sufficient time to eat</li> <li>• Appropriate cutlery provided</li> <li>• Children serve themselves and do activities (for example spread own bread, pour milk)</li> <li>• Non-food based reward schemes</li> <li>• Food posters on walls and food displays</li> </ul>		
3.2	How do you source local and seasonal food whenever possible?	<ul style="list-style-type: none"> <li>• Local fruit and vegetable produce supplier</li> <li>• Allotment activities – planting and growing</li> </ul>		



		<ul style="list-style-type: none"> <li>• Menu reflects seasonal foods</li> </ul>		
3.3	How do you ensure that portion sizes are appropriate?	<ul style="list-style-type: none"> <li>• Received and applied from the Level 2 Agored Cymru Community Food and Nutrition Skills Course for the Early Years</li> <li>• Access information via Food and Nutrition for Childcare Settings, Best Practice Guidance or other appropriate resources</li> <li>• Processes in place to ensure all relevant staff aware of appropriate portion sizes</li> </ul>		
3.4	How do you ensure that the setting provides an environment which promotes and is supportive of breastfeeding?	<ul style="list-style-type: none"> <li>• Role modelling (for example play and dolls)</li> <li>• Share stories that include breastfeeding</li> <li>• Talk with children about their siblings who are breastfed</li> <li>• Mothers are welcomed and made comfortable to breastfeed in the setting</li> <li>• (Where eligible) setting engaged in the Unicef Baby Friendly Initiative</li> <li>• Breast feeding information displayed in the setting and made available to parents (for example Unicef Baby Friendly Initiative resources, Bump Baby and Beyond resources)</li> </ul>		



		<ul style="list-style-type: none"> <li>• Include links to information about breastfeeding and returning to work for new parents or staff (Welsh Government All Wales Breast feeding 5-year Action Plan)</li> <li>• Participate in World Breastfeeding Week</li> </ul>		
3.5	How do you actively encourage the provision of healthy lunch boxes and home-provided meals, and provide information to children and parents/carers where appropriate?	<ul style="list-style-type: none"> <li>• Healthy packed lunch policy in place and clearly communicated to parents/carers</li> <li>• Healthy packed lunch displays</li> <li>• Healthy packed lunch resources provided to parents/carers (for example recipe ideas)</li> <li>• Family cooking activities</li> </ul>		
3.6	How do you teach children how to wash hands and the importance of good hand washing before eating?	<ul style="list-style-type: none"> <li>• Hand washing activities through songs and posters</li> <li>• Hand washing is part of daily routine for children and staff before preparing or eating any food</li> </ul>		
3.7	Are tables effectively cleaned with agents prior to, and after, serving and eating food?	<ul style="list-style-type: none"> <li>• Schedule in place for cleaning</li> <li>• Cleaning agents meet current British food safety standards</li> <li>• BS EN 1276 and BS EN 13697</li> </ul>		



## Family & Community Involvement

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider, you are not expected to do all of them	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community to support nutrition and oral health?	<ul style="list-style-type: none"> <li>• Parent/carer questionnaires asking for relevant support</li> <li>• Work with the community dental service, health visitor, dieticians, speech and language</li> <li>• Visits to local supermarkets with the children</li> <li>• Visit to local allotments with children</li> </ul>		
4.2	What information do you provide for parents/carers about the importance of good nutrition and oral health?	<ul style="list-style-type: none"> <li>• Newsletters, website, social media and/or displays include nutrition and oral health information (for example menus, snack list, leaflets, food policy)</li> <li>• Parents/carers evenings/sessions</li> <li>• Speakers to come in to discuss food, nutrition or oral health</li> <li>• Food tasting sessions for parents, using recipes from the menu</li> <li>• Recipes are made available for parents/carers to try at home (for example recipe of the week/month)</li> </ul>		



4.3	How do you actively engage with parents/carers to relay information on children's acceptance of new foods?	<ul style="list-style-type: none"><li>• Feedback in daily diaries about the food the child has eaten</li><li>• Keyworker verbal feedback about the food the child has eaten</li><li>• Displays with the food children have eaten today/this week</li><li>• Displays of children involved in food-related activity</li><li>• Recipes that children have enjoyed shared with families</li><li>• Photos sent home of children eating new foods</li></ul>		
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## Food and Drink Provision - Minimum Requirements

These must be in place in order to achieve the National award criteria for food and drink

These minimum requirements are designed to identify the provisions which are most likely to affect children's diets for the better, and which would be easily visible during an assessment visit. However, best practice would work beyond these requirements to address all of the outcomes in Welsh Government Food and Nutrition for Childcare Settings Best Practice Guidance.

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
5.1	Is fresh drinking water freely available to children at all times?	<ul style="list-style-type: none"> <li>• Water cooler in situ</li> <li>• Water bottles with name/picture of child</li> <li>• Water jugs and cups available all day</li> </ul>		
5.2	Are drinks between meals limited to plain water; or milk at snack times?	<ul style="list-style-type: none"> <li>• Menu and observation</li> <li>• Dairy and alternatives: provide 3 portions of dairy and/or alternatives each day including those provided at home</li> </ul>		
5.3	Is there a variety of nutritious snacks available in line with recommendations – which must contain fruit and/or vegetables?	<ul style="list-style-type: none"> <li>• Menu and observation</li> <li>• Evidence Welsh Government Food and Nutrition for Childcare Settings, Best Practice Guidance applied</li> <li>• Sessional Care: provide a portion of fruit and/or vegetables as part of all snacks, provide one portion of starchy carbohydrates as part of most</li> </ul>		

		snacks and provide protein as part of snack once or twice per week		
5.4	Do provided main midday and/or evening meals include fruit and vegetables?	<ul style="list-style-type: none"> <li>• Menu and observation</li> <li>• Fruit and Vegetables- Full day care: aim to provide 5 a day, ensure a variety offered across the week</li> </ul>		



5.5	Do provided main midday and/or evening meals contain meat, fish, or a suitable protein alternative (for example eggs, pulses, non-dairy alternative)?	<ul style="list-style-type: none"><li>• Menu and observation</li><li>• Evidence of working towards this requirement is acceptable in the first year with full compliance in year two</li><li>• Potatoes, bread, rice, pasta and other starchy carbohydrates: Full Day Care- Provide a portion of starchy carbohydrates at each meal and at least one snack per day</li><li>• Ensure a variety across the week</li></ul>		
5.6	Do you limit processed meat and fish options to high quality no more than twice a week?	<ul style="list-style-type: none"><li>• Menu and Observation</li><li>• Beans, pulses, fish, eggs, meat and other proteins: Full Day Care- provide one portion of beans, pulses, fish, eggs, meat or other proteins at lunch and tea</li></ul>		
5.7	Are products high in salt such as packet soups, stock cubes and packet sauces avoided?	<ul style="list-style-type: none"><li>• Menu and observation</li></ul>		



A decorative graphic consisting of several stylized, overlapping leaf-like shapes. Each shape is formed by a thick, dark red outline. The leaves are arranged in a horizontal row, with some overlapping others. The background is a solid, medium red color.

# **PHYSICAL ACTIVITY AND ACTIVE PLAY**



## Physical Activity and Active Play

This section reflects the importance of the promotion of a wide range of accessible physical activities and active play for children and staff including access to play environments and experiences that meet the developmental needs of the children. Other aspects of play are included in other sections as appropriate

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Leadership and Communication

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	What policies do you have in place to guide your work on physical activity and play? How are they regularly reviewed and updated?	<ul style="list-style-type: none"> <li>• Physical activity/active play policy (with review process in place)</li> <li>• A designated member of staff responsible for activity and play</li> </ul>		
1.2	What physical activity and active play training/mentoring have staff received and how has this influenced practice?	<ul style="list-style-type: none"> <li>• Playworker training (NVQ)</li> <li>• Physical Literacy training</li> <li>• Play or movement training</li> <li>• Outdoor play training (for example Natural Resources Wales or Play Networks)</li> <li>• Local play or physical activity training</li> <li>• Play to Learn resources</li> <li>• Evidence of practice</li> </ul>		



## Planning and Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What activities and experiences do you provide which encourage children to play and be physically active daily?	<ul style="list-style-type: none"> <li>• Daily opportunities to include and explore physical activity and play within schedule</li> <li>• Child-led choice of play and activities</li> <li>• Use of 'Play to Learn' or other physical activity and play resources</li> <li>• Yoga sessions</li> <li>• Daily dance sessions or daily action songs</li> <li>• Promote 180 minutes a day of physical activity in line with national guidelines</li> <li>• Provide outdoor play areas, adventure play equipment, climbing wall, slide, swings, bikes and scooters</li> <li>• Other sports and activity sessions or taster sessions for children</li> </ul>		



2.2	How do you plan for both indoor and outdoor regular active play for babies?	<ul style="list-style-type: none"> <li>• Opportunities for babies to roll, be on their front, reach out for toys</li> <li>• Benches for walking to improve balance, opportunities to climb</li> <li>• Baby massages</li> </ul>		
2.3	What local/national initiatives are you involved in that promote physical activity and active play for children or parents/carers?	<ul style="list-style-type: none"> <li>• Participation in charity events (for example Barnardo's Toddle, British Heart Foundation events, Children in Need, Red Nose Day, Sports Relief)</li> <li>• Beep Beep Day or other initiatives to promote safe active travel</li> <li>• Play to Learn</li> <li>• Activities linked to events (for example Olympics, Commonwealth Games, Six Nations)</li> <li>• Engagement with local leisure centres</li> <li>• Participation in national partner-led initiatives (for example Play Wales, Natural Resources Wales, Wildlife Trust)</li> <li>• Outdoor classroom/ learning week</li> </ul>		
2.4	How do you manage the balance between the need to offer risk and the need to keep children safe from harm during physical activity and play?	<ul style="list-style-type: none"> <li>• Risk assessments and risk management processes in place</li> <li>• Opportunities for children to take calculated risks, assess risk and develop their risk assessment skills in line with early childhood play, learning and care developmental pathways</li> </ul>		



## Ethos and Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	How do you ensure that water is freely available and consumption is actively promoted during and after activity?	<ul style="list-style-type: none"> <li>• Free access to water at all times (indoor and outdoor)</li> <li>• Children have their own water bottles/cup</li> </ul>		
3.2	How do you ensure children wash their hands after playing outside and after activities, especially water and sand play?	<ul style="list-style-type: none"> <li>• Daily routine includes hand washing after play sessions</li> </ul>		
3.3	What play equipment do you use which is made from recycled or reused materials?	<ul style="list-style-type: none"> <li>• Junk modelling</li> <li>• Tyers, logs, assault courses</li> <li>• Loose parts play (Play Wales)</li> </ul>		



## Family and Community Involvement

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community that support physical activity and active play?	<ul style="list-style-type: none"> <li>• Parent/carer questionnaires asking for relevant support</li> <li>• Play Wales, Sports Wales, National Wildlife Trust, Outdoor Learning Wales</li> <li>• Community visits with children (for example to the leisure centre, local playground or sports field or from physical activity role models)</li> <li>• Natural Resources Wales, Advisory teachers, Local Authority, Family Information Service, umbrella organisations</li> <li>• Local sports coaches or clubs and fitness instructors deliver sessions with children (for example dance, yoga, football)</li> <li>• Language and play sessions</li> </ul>		

4.2	<p>What information do you provide for parents/carers about the importance of physical activity and active play for themselves and their children?</p>	<ul style="list-style-type: none"> <li>• Newsletters, website, social media and/or displays include information (for example activities that are available locally and information about the benefits of activity)</li> <li>• Sharing resources (for example Every Child Wales resources) <a href="#">Parent Information Resources   Every Child (everychildwales.co.uk)</a></li> <li>• Parents/carers evenings or sessions with speakers or activities</li> <li>• Asking parents/carers to partake in voluntary activities or initiatives with their children</li> <li>• <a href="#">A Quality Framework for Early Childhood Play, Learning and Care in Wales (gov.wales)</a></li> </ul>		
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A large, stylized graphic of a leaf or branch, rendered in a light purple color, is centered on the page. The graphic consists of several overlapping, teardrop-shaped outlines that form a central stem and three main branches, each ending in a pointed leaf shape. The background is a solid, medium purple color.

**EMOTIONAL AND MENTAL WELL-BEING  
INCLUDING RELATIONSHIPS**



## Emotional and Mental Well-being including Relationships

This section reflects the ethos of the setting which should encourage mutual respect and promote the mental and emotional well-being, in the broadest sense, of all those who work within it. It also highlights the importance of the development of positive relationships and therefore covers some aspects of personal development.

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

**D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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**O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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**N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



Leadership and Communication				
	Assessment Questions All of these questions need to be addressed	Examples These are ideas of things you might like to consider; you are not expected to do all of them, this list is not exhaustive	Evidence of things we have done (D O N)	Signed Date
1.1	How are you implementing the Whole School Approach to Emotional and Mental Well-being framework (Statutory guidance for maintained settings)?	<ul style="list-style-type: none"> <li>Identifying settings needs and strengths in relation to emotional and mental well-being</li> <li>Action planning in place following setting evaluation of progress</li> <li>Engaging with staff and parents to explore areas for improvements</li> <li>Reviewing effectiveness of measures in place</li> </ul> <a href="http://www.gov.wales/framework-embedding-whole-school-approach-emotional-and-mental-wellbeing">www.gov.wales/framework-embedding-whole-school-approach-emotional-and-mental-wellbeing</a>		
1.2	What policies and plans are in place to guide your work on emotional and mental well-being including relationships, and dealing with sensitive issues? How are they regularly reviewed and updated?	<p>Relevant policies might include:</p> <ul style="list-style-type: none"> <li>Development plan identified as part of the review of emotional and mental well-being</li> <li>Behaviour and anti-bullying policy</li> <li>Emotional and mental well-being policy for staff and/or children</li> <li>Grievance policy</li> <li>Safeguarding policy</li> <li>Equalities policy or plan</li> <li>Separated parents policy</li> <li>Additional Learning Needs (ALN) policy &amp; Individual Development Plan's (IDP)</li> </ul>		



		<ul style="list-style-type: none"> <li>• Policies are complemented by emotional and mental well-being related activities included within setting with priorities identified and included within the setting action plan</li> <li>• Evidence that actions plans and policies are regularly reviewed</li> </ul>		
1.3	How do you ensure a consistent approach to behaviour management?	<ul style="list-style-type: none"> <li>• Designated member of staff for management of behaviour issues</li> <li>• Good practice guidance for staff and parents/carers</li> <li>• Staff induction, policies and training includes promoting positive behaviour management</li> <li>• ALN – Additional Learning Needs and (IDP) Individual Development Plans</li> <li>• Reward strategies for children that are consistently applied</li> <li>• Keyworker system</li> <li>• Promote positive rules and kindness around the setting</li> <li>• Behaviour policies and approaches are shared with parents/carers to enable partnership between home and setting</li> </ul>		
1.4	What emotional and mental well-being including relationship training have staff received and how has this influenced practice?	<ul style="list-style-type: none"> <li>• Attachment theory</li> <li>• Mental health awareness,</li> <li>• Positive behaviour strategies</li> <li>• Restorative practices</li> <li>• Bereavement and loss</li> </ul>		



		<ul style="list-style-type: none"> <li>• Equality and Diversity training</li> <li>• Trauma Informed Approaches</li> <li>• Sleep</li> <li>• Anti-bullying – (for example Kind Hands Kind Words)</li> <li>• Evidence of practice</li> </ul>		
Planning & Delivery				
	Assessment Questions All of these questions need to be addressed	Examples These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	Evidence of things we have done (D O N)	Signed Date
2.1	What activities and experiences are provided which support children's' social and emotional development, communication skills and diversity?	<ul style="list-style-type: none"> <li>• Individual or small group work for example nurture/circle time</li> <li>• Activities to promote a child's sense of belonging</li> <li>• Opportunities for every child to have their voice to heard</li> <li>• Promoting early attachment</li> <li>• Providing routines that enable children to feel safe and secure</li> <li>• Children are aware of a key childcare practitioner for emotional support (for example a named keyworker)</li> <li>• Seasonal/Cultural celebrations</li> <li>• Use of multi-cultural resources (for example toys, role play, story books)</li> <li>• Use of resources such as feelings cards/puppets, empathy doll</li> </ul>		



		<ul style="list-style-type: none"> <li>• Opportunity to discuss family love and friendship</li> <li>• Opportunities to be creative with arts and music and craft</li> <li>• Promoting physical, cultural and arts-based activities (for example gardening/growing, cooking, crafting and cooking)</li> <li>• Community participation</li> </ul>		
2.2	How do you positively plan, prepare and support children with transitions to and from the setting (to school or alternative settings)?	<ul style="list-style-type: none"> <li>• Transition plan in place for children settling in and moving on from the setting</li> <li>• Opportunities for transition visits to other settings</li> <li>• Opportunities to discuss transition with families</li> </ul>		
2.3	How do you provide babies and children under two years of age with the opportunity to interact with a consistent adult at frequent intervals and substantial periods of time during the day?	<ul style="list-style-type: none"> <li>• Childcare practitioner – keyworker system</li> <li>• Settling in review</li> <li>• Routine to enable babies to interact with consistent childcare practitioner throughout the day – food time, tummy time</li> </ul>		
2.4	How do you provide quiet areas to meet the sleep needs of individual children?	<ul style="list-style-type: none"> <li>• A quiet room, cots/mattresses on floor, dim lighting, monitor</li> <li>• Liaising with parents/carers and link with the home routine over sleep times</li> <li>• Alternative sleep arrangements</li> <li>• Discussed and made available</li> </ul>		

2.5	What local/national initiatives are you involved in to promote self-esteem of children or parents/carers?	<ul style="list-style-type: none"><li>• Health awareness days/weeks (for example mental health awareness week)</li><li>• Baby massage</li><li>• Parent/carer nurturing groups</li><li>• Language and play sessions</li><li>• Solihull Approach</li></ul>		
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		<ul style="list-style-type: none"> <li>• Outdoor Learning</li> <li>• Story Time (libraries)</li> <li>• Engagement in national initiatives that promote participation (for example Barnardo's Big Toddle, Wildlife Trust's Big Wildlife Walk, RSPB's Big Bird Watch, Children in Need, Timmy Time</li> <li>• Sport Relief Pack)</li> </ul>		
2.5	How do you keep informed and updated on the development of emotional and mental well-being in the setting?	<ul style="list-style-type: none"> <li>• Training</li> <li>• Staff health and well-being questionnaires</li> <li>• NHS website</li> <li>• Local partnerships</li> </ul>		

## Ethos & Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done (D O N)</b>	<b>Signed Date</b>
3.1	How do you create a pleasant, safe, sociable and responsive nurturing environment and how do you involve children?	<ul style="list-style-type: none"> <li>• Staff meetings to discuss emotional and mental health and well-being</li> <li>• Each child has their own space to keep coats and belongings to foster a sense of belonging</li> <li>• Children have a sense of ownership over parts of the setting</li> </ul>		



		<ul style="list-style-type: none"> <li>• Routines that promote security and independence</li> <li>• Promotion of positive rules that children contribute to and understand</li> <li>• Transition arrangements</li> <li>• Children’s work and displays at child height (where possible)</li> <li>• Calm environment (for example use of music, neutral colours)</li> <li>• A range of physical spaces and environments that support the emotional well-being of the children and staff</li> <li>• Childrens rights and voice of the child prioritised</li> <li>• Child-led play</li> </ul>		
3.2	<p>How do you provide opportunities for children to promote/ encourage confidence, self-esteem and well-being of themselves and others?</p>	<ul style="list-style-type: none"> <li>• Child-initiated planning</li> <li>• Every child receives praise; rewards system in place (non-food)</li> <li>• Nurture Time and/or individual or small group work where children have an opportunity to talk and listen</li> <li>• Children’s roles and responsibilities are clear (for example a ‘special’ job for the day)</li> <li>• Opportunities for children to deliver and receive peer praise/ compliments</li> <li>• Opportunities for children to display/share their work</li> </ul>		



		<ul style="list-style-type: none"> <li>Activities that promote independence (for example own pegs, serving own snacks and drinks, blow own noses, handwashing, going to toilet)</li> </ul>		
3.3	How do you ensure all staff and visitors support the policies and practice of the Pre-School setting?	<ul style="list-style-type: none"> <li>Regular communication to parent/carers and regular visitors</li> <li>Policies available on website, within welcome/registration pack or in folder for parents/carers to see</li> <li>Policy of the week/month promoted</li> <li>Setting rules displayed</li> <li>Noticeboard for parents/carers visitors and staff</li> <li>Checklist for visitors to review and sign on arrival</li> <li></li> </ul>		

### Family & Community Involvement

	<b>Assessment Questions</b>	<b>Examples</b>	<b>Evidence of things we have done (D O N)</b>	<b>Signed Date</b>
	All of these questions need to be addressed	These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive		



4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community to support children and parents/carers with issues related to emotional and mental well-being including relationships?	<ul style="list-style-type: none"> <li>• Positive management of difficult behaviour (including in partnership with parents/ carers)</li> <li>• Support and advice sought from educational psychologist, health visitors, early education and other partnership agencies as appropriate</li> <li>• Participation in multi-agency meetings (for example team around the child/family)</li> <li>• Information and signposting via local Family Information Service</li> <li>• Parent/carer questionnaires to understand their experience</li> </ul>		
4.2	What information do you provide for parents / carers about the importance of good mental and emotional health, well being and relationships for themselves and their children? How is this communicated?	<ul style="list-style-type: none"> <li>• Newsletters, website, social media sites and/or displays include information (for example behaviour policy, mental health awareness)</li> <li>• Consistent approach to positive behaviour strategies is discussed with parents/carers</li> <li>• Daily record sheets/diaries /apps/ given to parents/carers</li> <li>• Information about emotional and mental health and well-being included in communications and notice boards</li> <li>• Promoting or providing parenting programmes</li> <li>• Promoting national resources or initiatives (for example Parenting, give it time, Bump, Baby and Beyond)</li> </ul>		



		<ul style="list-style-type: none"><li>• Promoting and providing information on factors that support emotional and mental health (for example sleep, community connectedness, physical activity)</li><li>• Promoting and signposting to formal or informal support networks</li></ul>		
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A stylized graphic of a plant with several leaves, rendered in a dark brown color. The leaves are arranged in a cluster, with some overlapping. The graphic is centered on the page and spans across the horizontal band.

**ENVIRONMENT**



## Environment

This section reflects the ethos of the setting which should encourage mutual respect and promote the mental and emotional well-being, in the broadest sense, of all those who work within it. It also highlights the importance of the development of positive relationships and therefore covers some aspects of personal development.

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Leadership and Communication

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	What policies or action plans do you have in place to reduce your impact on the environment? How are they regularly reviewed and updated?	<ul style="list-style-type: none"> <li>• Environment/eco policy which includes involving children in the '5' R's process - reduce, reuse, recycle, repair and respect</li> <li>• Environmental review/eco-action plan</li> <li>• Environment/eco code</li> <li>• Designated member of staff with responsibility for environmental actions</li> </ul>		
1.2	What environmental and global awareness training have staff received and how has this influenced practice?	<ul style="list-style-type: none"> <li>• Gardening training</li> <li>• Outdoor learning training (for example forest schools training, beach school training)</li> <li>• Natural Resources Wales (NRW)</li> <li>• Local county council visit/talk</li> <li>• Keep Wales Tidy</li> <li>• Evidence of practice</li> </ul>		



## Planning & Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What authentic activities and experiences do you provide, which encourage and support children to make decisions about reducing their impact on the environment?	<ul style="list-style-type: none"> <li>• Activities focused on waste minimisation (for example reusing, recycling, composting, energy and water saving) and caring for the environment (for example active travel, increasing global awareness)</li> <li>• Activities focused on looking after nature (for example feeding birds, mini- beast hunt/bug hotel)</li> <li>• Mud kitchen</li> <li>• Minimising food waste</li> <li>• Outdoor mark making</li> <li>• Incentives to reward children's involvement with the environment. (for example emptying food waste into caddy)</li> <li>• Environmental art</li> <li>• Singing eco songs, eco stories or role play.</li> <li>• Link with learning within the Curriculum for Wales – Ethical, informed citizens</li> </ul>		



2.2	What local/national initiatives are you involved in that promote environmental issues for children and/or parents/carers?	<ul style="list-style-type: none"><li>• Activities/initiatives that engage with wildlife (for example Wildlife trust – Big Wild Walk, 30 Days Wild)</li><li>• Activities/initiatives that engage with local environment (for example Keep Wales Tidy, community litter picks, national gardening week)</li><li>• Outdoor learning activities/initiatives (for example outdoor learning week forest school, beach schools)</li><li>• Activities that promote positive environmental behaviours (for example plastic free July)</li><li>• Getting involved in local events/carnivals and festivals</li></ul>		
2.3	How do you monitor improvements and measure impact?	<ul style="list-style-type: none"><li>• Reduction in waste within the setting (for example food waste/ or non- recyclables).</li><li>• Visual displays of savings against the 5 R's Reduce, Reuse, Recycle, Repair and Respect</li><li>• Discussions with children and staff to review understanding</li><li>• Observations of behaviour</li><li>• Feedback from parents/ carers</li><li>• Before and after pictures of changes to an area (for example now having separate recycling bins)</li></ul>		



2.4	How do you ensure consistent messages are provided/ mixed messages are avoided in relation to environmental issues?	<ul style="list-style-type: none"><li>• Staff role modelling positive behaviours (for example recycling, composting, switch lights off)</li><li>• Setting practices are consistent with environment policy (for example switch off lights, reuse paper)</li><li>• Practice complements learning (for example lights switched off, paper recycled, active travel)</li><li>• Electronic communication (for example use of email where appropriate)</li><li>• Staff, parents/carers and children's awareness of sustainability</li></ul>		
2.5	How do you respond to locally identified environmental issues in your setting?	<ul style="list-style-type: none"><li>• Flexibility in planned activities based on risk assessment (for example change in weather/flooding, litter thrown into premises/animal fouling)</li></ul>		



## Ethos & Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	How do you create an environment that is welcoming, friendly, pleasant, safe and sociable for parents/carers and children, and how do you involve the children?	<ul style="list-style-type: none"> <li>• Parent/carer questionnaires/ collect parent views about the environment</li> <li>• Suggestion box/social media responses</li> <li>• Staff meetings to discuss improving the setting environment</li> <li>• Clear signage and information</li> <li>• Setting arranged into zones or areas</li> <li>• Correct indoor temperature maintained</li> <li>• Calm, clutter free environment</li> <li>• Displays at child height</li> <li>• Parent/carer displays/noticeboard</li> <li>• Pegs at child height with photos</li> <li>• Developing gardens/planters and/ or planting fruit and vegetables</li> <li>• Curiosity approach</li> <li>• Age-appropriate furniture and play equipment</li> <li>• Arranging planned regular outdoor trips and activities</li> <li>• Outdoor seating, play and climbing areas</li> <li>• Appropriate clothing for outdoor activities (for example wellies, rain suits, gloves, sun hats)</li> </ul>		



3.2	How do you actively encourage the reduction of waste and litter in your setting?	<ul style="list-style-type: none"><li>• Bulk buying/ decanting process</li><li>• Use recyclable/compostable packaging and re-usable bags</li><li>• Newsletters sent by email or other virtual alternative</li><li>• Do not use disposable plates and cups</li><li>• Food waste is composted/food caddy used</li><li>• Paper and cardboard are re-used and recycled</li><li>• Plastic, metal and glass is recycled</li><li>• Encourage the use of packages</li><li>• Free packed lunches</li><li>• Use of local fruit and veg shop and other local suppliers</li></ul>		
3.3	How do you actively encourage the setting community to use sustainable forms of transport?	<ul style="list-style-type: none"><li>• Walk to local areas of interest instead of using minibus</li><li>• Signpost bus/train timetable in welcome pack or on displays</li><li>• Promote active travel and participate in active travel initiatives</li><li>• Bike/scooter racks/scooter/pushchair/storage area</li><li>• Staff encouraged to car share</li></ul>		



## Family & Community Involvement

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community to support environmental activities?	<ul style="list-style-type: none"> <li>• Parent/carer email/newsletter/ social media post asking for involvement and support (for example participation in events or donation of old pots and pans for mud kitchen)</li> <li>• Visiting community settings (for example garden centres, waste management and recycling plants and local businesses)</li> <li>• Visits or workshops from local organisations (for example local environmental groups/allotment societies)</li> <li>• Outdoor learning support (for example forest school, beach schools)</li> <li>• National organisation resources and initiatives (for example Natural Resources Wales (NRW) website/ newsletter, Keep Wales Tidy, Royal Society Protection of Birds)</li> <li>• Engage with local authority initiatives and schemes</li> </ul>		



4.2	<p>What information do you provide for parents / carers about the importance of environmental initiatives in the setting?</p>	<ul style="list-style-type: none"> <li>• Newsletters, website, social media and/or displays include information (for example recycling, gardening, eco policy/code)</li> <li>• National resources promoted to parents via setting communication channels (for example NRW, Royal Horticultural Society (RHS), Keep Wales Tidy)</li> <li>• Open gardening day with parents/ carers and children</li> <li>• Parents/carers accompany children on visits (for example to garden centres, farms, RSPB reserves)</li> </ul>		
4.3	<p>How do you ensure that all members of the setting community comply with your Smokefree policy (to note this policy should also include e-cigarettes/vaping)?</p>	<ul style="list-style-type: none"> <li>• Signage</li> <li>• Policy</li> <li>• Information notice</li> <li>• board, newsletters, web site social media</li> <li>• Awareness about smokefree cars/ homes</li> <li>• Promote Help Me Quit</li> <li>• Promote smokefree playgrounds</li> <li>• Open gardening day with parents/ carers and children</li> <li>• Parents/carers accompany children on visits to (for example garden centres, farms, RSPB)</li> </ul>		



4.4	How do you ensure that all members of the setting community comply with policy with regard to smoke free environments, to include e-cigarettes?	<ul style="list-style-type: none"><li>• Signage</li><li>• Policy</li><li>• Information notice board, newsletters, website</li><li>• Awareness about smokefree cars/ homes</li><li>• Promote Stop Smoking Wales</li><li>• Smoke Free Playgrounds</li></ul>		
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**SAFETY**





## Safety

This section reflects a proactive and reactive approach to all aspects of safety including work on all substances. It should be recognised that the parental and staff use of alcohol and illegal substances could affect the safety of the children in the setting. Smoking and vaping is also included in this section but should be considered as a health issue and not just a safety issue.

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

**D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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**O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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**N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



Leadership and Communication				
	Assessment Questions All of these questions need to be addressed	Examples These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	Evidence of things we have done (D O N)	Signed Date
1.1	What policies, procedures and/or risk assessments are in place, which are regularly reviewed and updated, and do you have a named person responsible to guide your work in all aspects of safety?	<p>In addition to and complementing statutory policies:</p> <ul style="list-style-type: none"> <li>• Sun safety</li> <li>• Mobile phones and internet/</li> <li>• E-Safety</li> <li>• First aid</li> <li>• Administration of medication</li> <li>• Road safety</li> <li>• Outings policy</li> <li>• Food, including allergens safety</li> <li>• Playground safety</li> <li>• Lone working</li> <li>• Smoking, e-cigarettes, alcohol and other substance use or misuse (including compliance with and promotion of 2021 Smokefree legislation)</li> <li>• Immunisation, including the management of outbreaks</li> <li>• DBS and reference checks for staff</li> <li>• Setting risk assessment</li> </ul>		



1.2	How do you monitor and record procedures?	<ul style="list-style-type: none"><li>• E-safety logs</li><li>• Sickness register</li><li>• Log of reported outbreaks to Health Protection team (including outcome/actions)</li><li>• Visitor book</li><li>• Accident and incident book, which includes informing parents/carers</li><li>• Accident book regularly reviewed for patterns to identify and minimise risks</li><li>• Administration of medicine and consent forms</li><li>• Photograph/publicity consent form</li><li>• Risk assessments regularly reviewed</li><li>• Regular health and safety inspections</li><li>• Reports from other organisations that refer to safety</li><li>• Relevant staff meeting minutes discussing safety</li><li>• Procedures to ensure first aid box is checked and stock in date</li><li>• Fridge temperature records</li><li>• Allergen chart/information</li><li>• Outdoor area visual checklist</li><li>• Cleaning schedules</li><li>• Fire safety and evacuation procedures in place and evidence of practice</li></ul>		
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1.3	What safety related training have staff received and how has this influenced practice?	<ul style="list-style-type: none"> <li>• List of recent training relevant to policies in 1.1</li> <li>• Staff induction includes safety</li> <li>• Evidence of practice</li> </ul>		
1.4	How do you ensure there are sufficient staff trained in first aid on the premises for the care of infants and young children?	<ul style="list-style-type: none"> <li>• First aid training evidence</li> <li>• Staff rotas ensure sufficient first aid cover</li> <li>• Clear designated staff roles - displayed on noticeboard</li> </ul>		
1.5	How do you ensure written parental/ carer permission is obtained regarding emergency medical advice or treatment?	<ul style="list-style-type: none"> <li>• Welcome Pack - admissions application/consent form includes consent for emergency medical treatment</li> </ul>		
1.6	How do you respond to the incomplete immunisation status of children and staff?	<ul style="list-style-type: none"> <li>• Immunisation record available for outbreak management</li> <li>• General information on immunisations in newsletters/ notice boards/apps</li> <li>• Signposting to credible sources of information</li> </ul>		
1.7	How do you ensure that the cleaning products and chemicals used on site are of the correct standard and used and stored correctly?	<ul style="list-style-type: none"> <li>• Cleaning agents meet British Standards</li> <li>• Product storage, inaccessible to children</li> <li>• Care of Substances Hazardous to Health (COSHH) file</li> </ul>		



		<ul style="list-style-type: none"> <li>• Cleaning procedures refer to safe storage and use of products</li> <li>• Health and Safety Policy</li> <li>• Risk Assessments</li> </ul>		
1.8	How are parents/carers/staff provided with guidance on hygiene and safe storage of lunch boxes	<ul style="list-style-type: none"> <li>• Information included within welcome packs, on website or via newsletters</li> <li>• Information amplified through noticeboards</li> </ul>		

### Planning and Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What activities and experiences do you provide, which encourage children to keep themselves safe and healthy, minimise accidents and have respect for themselves and others and the environment?	<ul style="list-style-type: none"> <li>• Regular handwashing</li> <li>• Setting rules</li> <li>• Walking procedures</li> <li>• Evacuation procedure practice</li> <li>• 'People who help us'</li> <li>• Home safety (medicines/ household products/legal and illegal substances)</li> <li>• Road safety skills</li> <li>• Sun safety activities</li> <li>• Healthy body</li> <li>• Safe touch</li> <li>• Role play, stories</li> <li>• Tidy up time</li> </ul>		



2.2	What local / national initiatives are you involved in that promote the safety of children or parents/ carers?	<ul style="list-style-type: none"> <li>• Child Safety Week</li> <li>• Road Safety Week</li> <li>• Sun Safety Week</li> <li>• Safer Internet Day</li> <li>• Child Accident Prevention Trust (CAPT)</li> </ul>		
2.3	How do you ensure that consistent messages are provided/mixed messages are avoided in relation to all aspects of safety?	<ul style="list-style-type: none"> <li>• Staff role model positive behaviours (for example no smoking, no consumption of alcohol, use of sunscreen and hats)</li> <li>• Policies apply to all setting events</li> <li>• Staff training</li> <li>• Setting rules are consistent with safety policies</li> </ul>		

### Ethos and Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	How do you create a safe learning environment and how do you involve the children?	<ul style="list-style-type: none"> <li>• Staff meetings to discuss safety improvements</li> <li>• See policies and procedures in 1.1, 1.2, 1.4</li> <li>• Tidy up time</li> <li>• Clutter and hazard free environment</li> <li>• Rules for each area of play</li> </ul>		



3.2	How do you ensure all staff and visitors support the policies and practice of the setting?	<ul style="list-style-type: none"> <li>• Policies available on website/ App or in folder for parents/ carers to see</li> <li>• See 2.3 also for consistent messages</li> <li>• Staff induction includes safety policies, procedures, risk assessments and responsibilities</li> <li>• Staff handbook includes safety policies, procedures, risk assessments and responsibilities</li> <li>• Staff sign safety policies and procedures to confirm they understand them</li> <li>• Updates to safety policies, procedures and risk assessments discussed at staff meetings</li> <li>• Visitor book</li> <li>• Safety signage around setting for example walk on stairs, check play equipment before use</li> <li>• Noticeboard</li> <li>• DBS checks</li> </ul>		
3.3	How do you ensure the whole setting environment, including the outside area, is a smoke free zone including e-cigarettes?	<ul style="list-style-type: none"> <li>• Signage</li> <li>• Policy</li> <li>• Information on noticeboard, newsletters, website</li> <li>• Awareness of smokefree cars</li> </ul>		



Family and Community Involvement				
	Assessment Questions All of these questions need to be addressed	Examples These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	Evidence of things we have done (D O N)	Signed Date
4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community to support children and parents/carers with issues related to safety, substances and tobacco?	<ul style="list-style-type: none"> <li>• Parent/carer questionnaires asking for relevant support</li> <li>• Support with policy development from partner organisation such as Early Years Wales: <a href="http://www.earlyyears.wales">www.earlyyears.wales</a></li> <li>• Public Health Wales (PHW) Help Me Quit <a href="http://www.helpmequit.wales">www.helpmequit.wales</a></li> <li>• Health visitors</li> <li>• Reference agencies that have supported policy development</li> <li>• Emergency services (prevention and response)</li> <li>• Safeguarding agencies</li> <li>• Team around the child/family</li> <li>• Lollipop person</li> <li>• Child Accident Prevention Trust</li> </ul>		
4.2	How is information provided for parents/carers about substances (including smoking and vaping), the importance of safety and infection prevention and control?	<ul style="list-style-type: none"> <li>• Newsletters, websites and/or displays include information (for example car seats, sun safety, water safety, Help Me Quit, exclusion information for childhood illnesses)</li> </ul>		



		<ul style="list-style-type: none"><li>• Smokefree information in welcome pack</li><li>• Wider smokefree promotion (for example cars, homes)</li><li>• Health promotion campaigns promoted (for example National no smoking day)</li><li>• Stay and play sessions</li><li>• Illness management</li><li>• Illness outbreak information shared with parents/carers (for example measles outbreak/Diarrhoea and Vomiting (D&amp;V))</li><li>• Immunisation information shared with parents/carers</li><li>• Access information from the Child Accident Prevention Trust website to share with parents/carers</li></ul>		
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A decorative background featuring a repeating pattern of stylized, teardrop-shaped leaves. The leaves are rendered in two shades of orange: a darker, more saturated orange and a lighter, more muted orange. The leaves are arranged in a staggered, overlapping fashion, creating a sense of movement and depth. The overall aesthetic is clean, modern, and natural.

**HYGIENE**



## Hygiene

Good hygiene is crucially important to early years settings and relevant hygiene advice available within the National Guidance in Health Protection for Child Care Settings.

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Leadership and Communication

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	What hygiene policies, procedures and/or risk assessments do you have in place to guide your work on hygiene and infection control, and how are they kept under review?	<ul style="list-style-type: none"> <li>• Named person responsible for hygiene or aspects of it supported by others (for example caretaker, building supervisor)</li> <li>• Hygiene/infection prevention and control policy</li> <li>• Food safety policy, hygiene procedures and risk assessment based on the National Guidance in Health Protection for Child Care Settings</li> <li>• Use of 'Food Standards Agency Wales: 'Safer food, better business for childminders' (SFBB)</li> <li>• Kitchen hygiene, food preparation and storage refer to Hazard Analysis and Critical Control Point (HACCP) procedures</li> <li>• Appropriate bottle, preparation feeding and storage of breast and formula milk</li> <li>• Handwashing</li> <li>• Premises cleaning schedules, instructions and checklists (for example colour coded areas)</li> </ul>		



		<ul style="list-style-type: none"> <li>• Toy and equipment cleaning schedules</li> <li>• Toileting: nappy changing, toilet training, potties</li> <li>• Dummies hygiene</li> <li>• Toothbrush hygiene</li> <li>• Blood and bodily fluid spillages</li> <li>• Laundry</li> <li>• Pets or farm/zoo visits/ forest schools</li> <li>• Waste management</li> <li>• Illness/symptoms</li> <li>• Public Health Wales Exclusion Period for Common Infection</li> <li>• Headlice</li> </ul>		
1.2	How do you monitor and record and review hygiene policies and procedures?	<ul style="list-style-type: none"> <li>• Risk assessments regularly reviewed</li> <li>• Regular health and Safety inspections</li> <li>• Reports from other organisations (for example Care Inspectorate Wales (CIW) inspections)</li> <li>• Environmental health inspections</li> <li>• Staff meeting minutes</li> <li>• Completed signing sheets for cleaning and toileting</li> <li>• Fridge temperatures recorded daily</li> <li>• Sickness and symptoms log for staff and children</li> </ul>		



1.3	How have you considered the 'Infection Prevention and Control Quality Improvement (Audit) Tool for Childcare and Education settings in Wales and what changes have you made?	<ul style="list-style-type: none"> <li>• Complete, share and repeat the audit tool as per guidance termly</li> <li>• Share the Audit during team meetings</li> <li>• Advice from Local Authority/ Public Health Wales</li> <li>• Public Health Wales Exclusion Period for Common Infection</li> </ul>		
1.4	What hygiene related training have staff received? How has this training influenced your setting practice?	<ul style="list-style-type: none"> <li>• Training related to infection and prevention control</li> <li>• Food safety training</li> <li>• Hand washing training</li> <li>• Induction includes hygiene / infection prevention and control training and information</li> <li>• Staff meetings include discussion about hygiene/ infection prevention and control</li> <li>• Evidence of practice</li> </ul>		
1.5	How do you incorporate flexibility to respond to locally identified issues (where appropriate)?	<ul style="list-style-type: none"> <li>• Follow health protection advice in response to suspected or confirmed outbreaks of infection in childcare settings</li> <li>• Use Public Health Wales Exclusion Period for Common Infection (for example restricting certain activities during outbreak)</li> <li>• Illness outbreak notifications and management information shared with parents/carers Proactive response (for example headlice letters/leaflets sent to parents/carers or promoted on social media or apps used)</li> </ul>		



## Planning and Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What activities and experiences do you provide which encourage good hygiene with the children?	<ul style="list-style-type: none"> <li>• Cooking activity which promote food safety practices (for example wearing aprons, tying hair back, handwashing)</li> <li>• Food/messy play activities are risk-assessed</li> <li>• Outdoor play/gardening includes hand washing, wearing overalls, wellies and gloves</li> <li>• Supporting independent personal hygiene or circle-time activities based on real life experiences (for example handwashing, tooth brushing, hygienic nose blowing, sneezing, coughing and tissue disposal-cough etiquette)</li> <li>• Tooth brushing</li> <li>• Care Settings</li> <li>• Pet-based activity includes handwashing afterwards (in line with National Guidance in Health Protection for Children)</li> </ul>		
2.2	What local and National initiatives are you involved in to promote good hygiene?	<ul style="list-style-type: none"> <li>• Designed to Smile</li> <li>• National Smile Month (May/ June)</li> <li>• Global Handwashing Day (15 October)</li> </ul>		



		<ul style="list-style-type: none"><li>• Food Safety Week (June)</li><li>• Food Standards Agency rating displayed as appropriate</li></ul>		
2.3	How do you ensure consistent messages are provided/mixed messages are avoided in relation to hygiene?	<ul style="list-style-type: none"><li>• Practice is consistent with messages conveyed in policies and procedures (listed in 1.1)</li><li>• Staff role model positive behaviour (for example handwashing, food safety)</li><li>• Tissues available at child height in every room</li><li>• Warm water, liquid soap and paper towels available for all children and staff-signposting</li><li>• Setting reinforces positive handwashing routine (for example before and after eating, food prep, following toileting and outdoor play)</li><li>• Designed to Smile hygiene and infection control guidance followed</li><li>• Trips are risk assessed to ensure there are appropriate facilities for toileting and handwashing</li></ul>		



## Ethos and Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	How do you ensure all staff and visitors support the policies and practice of the Pre-School setting?	<ul style="list-style-type: none"> <li>• Staff job descriptions show their hygiene responsibilities</li> <li>• Named person responsible for hygiene or aspects of it supported by others (for example Caretaker, building supervisor)</li> <li>• Duty Rota for cleaning and hygiene</li> <li>• Staff induction and /or handbook includes hygiene / infection prevention and control policies, procedures and responsibilities</li> <li>• Staff maintain hygiene checklists</li> <li>• Staff sign all hygiene policies and procedures confirm they understand them</li> <li>• Updates to hygiene policies and procedures are discussed at staff meetings</li> <li>• Learning from outbreak management discussed at team meetings</li> <li>• Policies are available on website, social media or in folder for parents/carers to see</li> </ul>		



		<ul style="list-style-type: none"><li>• Know who to raise concerns with</li><li>• Hygiene signs are displayed around the setting (for example handwashing, checklists displayed, provision of aprons etc.)</li><li>• Ensuring staff know where to access Health Protection information online</li></ul>		
3.2	What guidance do you display in relation to hygiene and where is it displayed?	<ul style="list-style-type: none"><li>• Explain where documents mentioned in 1.1 are displayed in your setting</li><li>• Explain where checklists for cleaning, kitchen hygiene, toy and equipment cleaning are displayed and stored</li><li>• How and when to wash hands posters are displayed by all wash basins</li><li>• Explain where illness/symptom exclusions are displayed</li><li>• Food hygiene rating displayed on door</li><li>• “Catch it Bin It Kill it” posters displayed</li><li>• Nappy disposal procedure</li></ul>		



## Family and Community Involvement

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
4.1	How do you engage with individuals, outside agencies, businesses and/or members of the community to support hygiene policy, procedures and practice?	<ul style="list-style-type: none"> <li>• Parent/Carer support</li> <li>• Care Inspectorate Wales (CIW)</li> <li>• National Guidance in Health Protection for Child Care Setting</li> <li>• Support with policy development from partner organisation and local authority (for example environmental health)</li> <li>• Health Visitor/School nurse</li> <li>• Designed to Smile team</li> <li>• Environmental Health Officer/ Local Health Protection Team / local public health team incident notification process – All Wales Acute Response (AWARe) Health Team</li> </ul>		
4.2	How do you provide information for parents/carers about the importance of good hygiene for themselves and their children?	<ul style="list-style-type: none"> <li>• Newsletters, social media/apps websites and/or displays include information (for example handwashing, illness/symptom exclusion periods)</li> <li>• Information to parents/carers during outbreaks or incident management</li> </ul>		



		<ul style="list-style-type: none"> <li>• Information about a child's daily hygiene or health concern is shared with parents/carers in their diary or verbally via keyworker</li> <li>• Messaging should focus on prevention (for example by promoting good hygiene practices) as well as effective incident management (for example sharing information and advice regarding an outbreak)</li> </ul>		
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### Hygiene Standards – Minimum Requirements

These must be put in place in order to achieve the national award criteria for hygiene

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
5.1	Do children and staff have access at all times to toilets that are well ventilated and cleaned regularly?	<ul style="list-style-type: none"> <li>• Define the inspection procedure</li> </ul>		
5.2	Is there liquid soap, paper towels (driers) and warm water provided in toilets for children and staff?	<ul style="list-style-type: none"> <li>• Liquid soap and paper towels are replenished regularly</li> </ul>		



5.3	Is there toilet paper provided in toilets for children and staff?			
5.4	Are paper towels/hand dryers provided in toilets for children and staff?			
5.5	Is there guidance displayed for children and staff on when and how to wash hands?			
5.6	Do sanitary disposal facilities exist for staff?	<ul style="list-style-type: none"> <li>• PHS sanitary disposal, lidded bins</li> </ul>		
5.7	Are all toilets cleaned and monitored?	<ul style="list-style-type: none"> <li>• Cleaning rota for toilets</li> <li>• Signing sheet for cleaning toilets</li> </ul>		
5.8	Do children and staff wash hands before and after eating and serving food?			
5.9	Are water coolers cleaned and maintained?	<ul style="list-style-type: none"> <li>• Water cooler service sheet</li> <li>• Setting check sheet for water cooler</li> <li>• Define the inspection procedure</li> </ul>		
5.10	If children drink water from bottles, these are not shared, and are there are clear procedures for washing those water bottles?	<ul style="list-style-type: none"> <li>• Procedure in place for washing water bottles</li> <li>• Childrens personal water bottles are sent home for parents/carers to wash</li> </ul>		



		<ul style="list-style-type: none"> <li>• All bottles are put through dishwasher daily</li> <li>• All bottles are sterilised weekly</li> </ul>		
5.11	Is staff room/kitchen cleanliness maintained?	<ul style="list-style-type: none"> <li>• Staff room cleaning rotas and checklists in place (for example microwave, fridge checks, sink)</li> </ul>		
5.12	Are parents/carers provided with guidance on illness/ symptom absence	<p>Information is provided in:</p> <ul style="list-style-type: none"> <li>• Parent/carer packs</li> <li>• Noticeboard</li> <li>• Website/social media/apps</li> <li>• Letters and newsletters</li> </ul>		
5.13	Has the setting achieved a Food Standards rating of 3 or above under the Food Standards Agency's Food Hygiene Rating Scheme?	<ul style="list-style-type: none"> <li>• Sticker displayed in setting</li> <li>• Report from accreditation visit</li> </ul>		
5.14	Are there facilities in place for the hygienic preparation of babies' feeds?	<ul style="list-style-type: none"> <li>• Follow Milk for Babies in the National Guidance in Health Protection for Child Care Settings</li> </ul>		
5.15	Is suitable sterilisation equipment used for babies feeding equipment and dummies?	<ul style="list-style-type: none"> <li>• Follow Milk for Babies in the National Guidance in Health Protection for Child Care Settings</li> </ul>		
5.16	If there are any animals on the premises, are they safe to be in the proximity of children and do not pose a health risk?	<ul style="list-style-type: none"> <li>• Policy or procedure in place</li> <li>• Risk assessment</li> <li>• Consider ownership and vaccination records</li> </ul>		



A decorative graphic consisting of several stylized, overlapping leaf shapes in various shades of green, arranged in a cluster across the center of the page. The leaves are outlined with thick, rounded strokes, creating a modern, organic feel. The background is a solid, light green color.

# **WORKPLACE HEALTH AND WELL-BEING**



## Workplace Health and Well-being

**\*\*This section does not apply to child-minders working alone\*\***

**This section reflects the importance of a health promoting workplace with a commitment to the health and well-being of all staff. Fair work within healthy and safe environments are important for physical and mental health and well-being. Workplaces are also important settings to promote and normalise healthy lifestyle behaviours. Employers who adopt working practices and environments that promote good health and prevent ill health are more likely to have a happy, healthy and productive workforce, with lower levels of sickness absence.**

Each question must be addressed with at least one piece of evidence being available on assessment. This can be documentation, observation or narrative:

- D Documentation** – for example written evidence such as policies, photos, children’s work, planning, letters, newsletters, apps, social media setting website, meeting notes, extracts from reports.

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- O Observation** – this could be an observation made by the local coordinator. It must be within 12 months of the assessment. The local coordinator can add a date and signature to say that they observed what the setting has described. In addition, observed evidence is that which the assessors see during their time at the setting for example displays, signs, scrap/floor books.

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- N Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.



## Leadership and Communication

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
1.1	What policies do you have in place to guide your work on staff health and well-being. How are they regularly updated and reviewed?	Range of relevant policies such as: <ul style="list-style-type: none"> <li>• Staff health and well-being policy</li> <li>• Staff confidentiality policy</li> <li>• Staff equalities policy</li> <li>• Work-life balance policy</li> <li>• Flexible working policy</li> <li>• Staff sickness &amp; return to work policy</li> <li>• Bullying and harassment policy</li> <li>• Designated staff to lead the work on staff health and well-being</li> <li>• Health and well-being working group or committee to oversee and regularly review policies and implement health and well-being activities/initiatives</li> <li>• Review policies annually (or sooner if required (for example changes in legislation, issues raised); involve staff in reviews; ensure staff are made aware of any changes</li> <li>• Create a culture which does not tolerate inappropriate behaviour amongst employees within or outside the workplace</li> <li>• Staff employment contract</li> </ul>		



1.2	How are staff consulted and involved in the development of a health-promoting workplace?	<ul style="list-style-type: none"> <li>• Named well-being lead</li> <li>• Questionnaires about staff health and well-being</li> <li>• Staff meetings to discuss well-being</li> <li>• Well-being is always an agenda topic in one-to-one meetings</li> <li>• Ideas/suggestion box</li> <li>• Staff lead on organising staff well-being and social activities (for example walking session, staff social)</li> </ul>		
1.3	How do you ensure staff are involved in policy development and are aware of policies and procedures?	<ul style="list-style-type: none"> <li>• Representation from all staff groups in health and well-being working group/committee that reviews policies</li> <li>• Staff made aware of policies and procedures during induction</li> <li>• Policies and procedures in staff handbook</li> <li>• Staff sign policies to say they have read them</li> <li>• Policies are reviewed in team meetings as part of quality-of-care review</li> <li>• Initiatives to highlight policies (for example policy of the week on the intranet)</li> <li>• Discussed as part of annual appraisals/reviews</li> <li>• Training is provided to update staff on policies or procedures</li> </ul>		



1.4	How do you ensure staff are given opportunities to develop skills, and knowledge of health, safety and well-being?	<p>Coordinated external and/or in house training programme in place which all staff can access, such as:</p> <ul style="list-style-type: none"><li>• Stress management training</li><li>• Equalities, inclusion and diversity training</li><li>• E-learning for courses such as food safety and safeguarding</li><li>• Training available for staff with specific areas of responsibility (for example appraisal training / supervision training and effective sickness absence management training for leaders and managers)</li><li>• Leaflets, newsletter, noticeboard, British Heart Foundation)</li><li>• Staff-focused initiatives (for example supporting staff nutrition and physical activity)</li><li>• Staff access health information in their break times</li><li>• Manual Handling/Moving and Handling, Fire Safety, Health, Safety and Welfare, Infection Prevention and Control training</li></ul>		
1.5	How do you know policies, initiatives and training have influenced practice within the setting?	<ul style="list-style-type: none"><li>• Monitoring levels of sickness</li><li>• Health and well-being staff survey</li><li>• Sharing and use of health and well-being guidance and resources available on the Healthy Working Wales website including on mental health, lifestyle behaviours (for example smoking)</li></ul>		



1.6	How does the setting demonstrate support for staff in maintaining their emotional and mental well-being?	<ul style="list-style-type: none"><li>• Relevant policies in place</li><li>• Support systems are in place, for example regular staff supervision or access to service such as employee assistance programmes</li><li>• Peer-to-peer support mechanisms</li><li>• Activities that support physical and emotional well-being promoted and supported through the workplace, (for example topics such as eating well, physical activity, social connectivity promoted via initiatives, information, guidance, and policies etc.)</li><li>• Use of guidance and resources available via Healthy Working Wales website</li><li>• Use of MIND resources including Wellness Actions Plans</li><li>• Completion of risk assessments relating to job demands</li></ul>		
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## Planning and Delivery

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
2.1	What opportunity do staff have to discuss issues related to their job, and what support do you offer when they are dealing with sensitive issues?	<ul style="list-style-type: none"> <li>• Regular one-to-ones with manager/team leader</li> <li>• Regular team meetings</li> <li>• Regular whole setting meetings</li> <li>• Open door policy with managers/ supportive management structure</li> <li>• Buddy staff together</li> <li>• Occupational health advice line for managers/staff</li> <li>• Access or signposting to Employee assistance programme and/or counselling or other support services</li> <li>• Dealing with complaints in a compassionate way</li> </ul>		
2.2	What method do you use for gauging staff satisfaction?	<ul style="list-style-type: none"> <li>• Regular staff questionnaires/ surveys/feedback</li> <li>• Sharing compliments and celebrating success</li> <li>• Team or whole setting meetings</li> <li>• Informal discussions</li> <li>• Staff reflections</li> <li>• Staff turnover</li> </ul>		



		<ul style="list-style-type: none"> <li>• Exit interviews</li> <li>• Suggestion box (anonymous)</li> <li>• Supervision/appraisal</li> </ul>		
2.3	What actions have you taken from staff feedback?	<ul style="list-style-type: none"> <li>• Details of any changes made due to staff feedback or suggestions</li> <li>• Feedback on why changes cannot be implemented</li> </ul>		

### Ethos and Environment

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
3.1	Do staff have designated times for breaks and lunchtimes away from the children?	<ul style="list-style-type: none"> <li>• Rota/timetable for staff breaks</li> <li>• Staff handbook/induction</li> </ul>		
3.2	Do staff consider staff room facilities to be adequate (if applicable)?	<ul style="list-style-type: none"> <li>• Away from children</li> <li>• Facilities for cooking, making hot drinks etc.</li> <li>• Appropriate facilities for breastfeeding mothers</li> <li>• Seating area and tables</li> <li>• Outside seating/access to positive outdoor space</li> <li>• Clean and tidy (for example how are they maintained?)</li> <li>• Explored in staff questionnaire</li> </ul>		



3.3	Where practical, are there separate toilet facilities for adults?			
3.4	How do you help staff address work-life balance?	<ul style="list-style-type: none"> <li>• Staff handbook</li> <li>• Flexible working policy</li> <li>• Provide advice and guidance</li> <li>• Supervision/appraisal/PADR</li> <li>• Open door policy</li> </ul>		
3.5	How does the setting monitor staff sickness, absence, return to work procedures, staff turnover and vacancies?	<ul style="list-style-type: none"> <li>• Staff handbook</li> <li>• Return to work questionnaire</li> <li>• Exit interview</li> <li>• Risk assessment (workplace, pregnancy - reasonable adjustments)</li> <li>• Sickness policy/return to work policy</li> </ul>		
3.6	What activities do you provide to help staff develop confidence, self-esteem and well-being of themselves and others?	<ul style="list-style-type: none"> <li>• Staff have designated responsibilities to develop confidence</li> <li>• Staff take it in turns to organise social events, or regular activities (virtual or face-to-face)</li> <li>• Group activities or goals such as Couch to 5k and park-run, yoga, cycle training</li> <li>• Organised staff well-being information session with guest speakers (for example drugs and alcohol, Help Me Quit, Dietician)</li> <li>• Use of a closed social media group for support and socialisation</li> </ul>		



3.7	What staff social events are organised?	<ul style="list-style-type: none"> <li>• Sponsored walks and events</li> <li>• Virtual or face to face activities (for example team quiz nights)</li> <li>• Charity events (for example Tough Mudder, Tickled Pink, Muddy Runs)</li> </ul>		
3.8	How do you communicate with all staff?	<ul style="list-style-type: none"> <li>• Daily briefing for all staff</li> <li>• Digital – intranet, digital whiteboard, social media, WhatsApp groups</li> <li>• Newsletters</li> <li>• Pigeonholes for all staff</li> <li>• Noticeboard</li> <li>• One-to-ones, team meetings, open door policy, drop-in sessions</li> </ul>		

### Family & Community Involvement

	<b>Assessment Questions</b> All of these questions need to be addressed	<b>Examples</b> These are ideas of things you might like to consider; you are not expected to do all of them, and the list is not exhaustive	<b>Evidence of things we have done</b> (D O N)	<b>Signed Date</b>
4.1	What access to specialised services do staff have?	<ul style="list-style-type: none"> <li>• Information on health topics, guidance, signposting to services available on Healthy Working Wales website</li> <li>• Employee assistance programme or Health at Work Advice Line</li> <li>• Occupational health</li> <li>• NHS 111 Wales</li> <li>• Information on intranet about local or national services and helplines</li> </ul>		



