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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:

1. have a flying start in life;
2. have a comprehensive range of education and learning opportunities;
3. enjoy the best possible health and are free from abuse, victimisation and exploitation;
4. have access to play, leisure, sporting and cultural activities;
5. are listened to, treated with respect, and have their race and cultural identity recognised;
6. have a safe home and a community which supports physical and emotional well-being; and
7. are not disadvantaged by poverty.

In respect of this scheme of particular relevance are articles:

Article 12: Children have the right to say what they think should happen when adults are making decisions that affect them, and to have their opinions taken into account.

Article 23: Children who have any kind of disability should have special care and support.

Article 24: Children have a right to health care; nutritious food and a clean environment check right number and put in order.

Article 31: Children have a right to relax and play and join in a wide range of activities.
Origins: Healthy Schools

The Welsh Network of Healthy School Schemes (WNHSS) was launched in 1999 following a 2-year pilot programme as part of the WHO/EC/CoE initiative—the European Network of Health Promoting Schools. The scheme was developed following recommendations from a Task and Finish Group and the aims on set-up were to ensure that local healthy school schemes were established in health and education partnerships in each local authority area in Wales.

The WNHSS consists of local healthy school schemes, one in each local authority in Wales, and over 99% of maintained schools are actively involved. Each scheme employs one or more healthy schools co-ordinators who recruit and support schools and organise appropriate local training and accreditation. Schools appoint their own in-school co-ordinators who work with the healthy schools co-ordinator to plan and implement actions identified by the school. As schools progress through the scheme, health-improvement measures are expected to make a lasting difference to the way in which school life is organised.

In order to ensure consistency of achievement, the WNHSS National Quality Award was introduced in 2010. This has clear indicators for 4 aspects of school practice – Leadership and Communication, Curriculum, Ethos and Environment, and Family and Community Involvement – for 7 aspects of health (Mental and emotional health and well-being; Food and fitness; Personal development and relationships; Substance use and misuse; Environment; Safety and Hygiene).

The Healthy and Sustainable Pre-school Scheme has been developed as an extension of WNHSS and the criteria have clear parallels with the WNHSS National Quality Award.

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 refers to consideration of issues of environmental sustainability as part of this work. In Wales sustainable development means enhancing the economic, social and environmental wellbeing of people and communities, achieving a better quality of life for our own and future generations.

The Welsh Government Sustainable Development Scheme ‘One Wales: One Planet’ sets out the vision of a sustainable Wales and explains how the different elements of sustainable development, fit together. This includes environmental sustainability, which includes protecting local environments and using resources sustainably.
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 as a whole.

Links to Other Programmes and Initiatives

Foundation Phase

The Foundation Phase is the statutory curriculum for all three to seven year olds in Wales, having been introduced in September 2010. It encourages children to be creative and imaginative, and makes learning more enjoyable and more effective.

The Welsh Government’s approach to education and lifelong learning is set out in the broader context of our vision for children and young people. Details of the Welsh Government’s ten-year plan for the early years and childcare can be found in *Building a Brighter Future: Early Years and Childcare Plan* (2013).

The statutory Areas of Learning in the Foundation Phase are:

- Personal and Social Development, Well-being and Cultural Diversity
- Language, Literacy and Communication Skills Mathematical Development
- Welsh Language Development
- Knowledge and Understanding of the World
- Physical Development
- Creative Development

The Healthy and Sustainable Pre-school Scheme supports the basic principles and learning framework of the Foundation Phase by contributing to all of the above.

Flying Start

The Healthy and Sustainable Pre-school Scheme supports the basic principles and learning framework of 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.

Designed to Smile

Designed to Smile is a national oral health improvement programme to improve the dental health of children in Wales.
Small Workplace Award
The small workplace health award is the national mark of quality for health and well-being in the workplace, for businesses and organisations employing fewer than 50 people.

ESTYN
Have indicated that this scheme provides a framework for use by pre-school settings to evaluate their provision for promoting the health and wellbeing of children and staff; and to identify possible approaches to improving that provision.

National Minimum Standards for Regulated Child Care (NMS)
The Healthy & Sustainable Pre – School Scheme has been designed to complement the NMS which are used to determine whether child minding and day care settings are providing adequate care for children under the age of eight. All registered childcare providers must have regard to the NMS, which focus on securing positive outcomes for children under eight and reducing risks to their welfare and safety.

Eco-Schools
The Eco-Schools programme is an international initiative that encourages pupils to engage with environmental and sustainable development issues. It provides a highly structured system for the environmental management of schools. The programme is a learning resource and topic areas include: Litter, Waste Minimisation, Transport, Healthy Living, Energy, Water, School Grounds and Global Citizenship.

Pupils take key roles in decision making and participation in order to reduce the environmental impact of their school. In this way, Eco-Schools extend learning beyond the classroom and develop responsible citizenship attitudes both at home and in the wider community.

The Eco-Schools programme in Wales is managed by Keep Wales Tidy.
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 co-ordinated, 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.

Mental and Emotional Health, Wellbeing and Relationships Reflecting the ethos of the setting which should encourage mutual respect and promote the mental and emotional wellbeing, 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.

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 e.g. 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 Settings will reflect good hygiene, as it is crucially important to early year’s settings.

Workplace Health and Wellbeing Promoting workplace with a commitment to the health and wellbeing 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 Limited.

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 highlight the impact of the work and to demonstrate how each assessment question has been met.

Monitoring

The co-ordinator will continuously monitor each setting. This could be a pre-arranged setting visit or at network meetings.

Settings will also be required to self-monitor using the award criteria booklets to record their progress and through compilation of a portfolio of evidence. It is important to keep the whole setting community informed and updated about progress made and goals achieved.

Portfolio of Evidence

At the end of each phase of the scheme, all settings will be asked to compile and present a portfolio of evidence showing how each action area was successfully completed. The co-ordinator 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. Evidence can be narrative, documentary or observed and a combination of evidence is recommended.

Ideas for evidence include:

- Associated policies.
- Newsletters.
- Reports.
- Agendas/minutes of meetings.
- Consultation events.
- Related letters e.g. to parents.
- Flyers.
- Photographs.
- Press cuttings.
- Lesson plans.
- Examples of children’s work.
- Staff bulletins.
- Setting diaries.
- Training records/certificates of attendance.
- Questionnaires/surveys
- Leaflets and posters used as part of setting events and campaigns.
- Setting website.
- Written observations.
- DVDs/videos
- Written records of discussions with parents, staff, children and the wider community.
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 (e.g. via coffee mornings).
• Before and after observations
• Staff/management reflections on practice.
• Measuring children’s participation in activities.

The Welsh Government requires all Healthy Schools Teams in Wales to carry out formal evaluation of the scheme. The local Pre-school co-ordinator will advise settings on any further, specific information that needs to be collected.

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 at all times.

Accreditation

At the end of each phase of the scheme a setting will be recommended for accreditation providing there is sufficient evidence to show that each of the action areas 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.

A Healthy Pre-school setting is one which, not only works towards accreditation, but embeds and embraces health and wellbeing within its day to day life.
Aims

A. To promote actively the development of the positive self esteem of all members of the pre-school setting community.

B. To actively develop good relationships in the daily life of the pre-school setting.

C. To identify, develop and communicate a positive ethos which promotes respect towards all, and a positive approach to health, the environment and the community.

D. To ensure that all children have the opportunity to benefit from stimulating challenges and the right to play.

E. To take every opportunity to enhance the environment of the pre-school setting.

F. To develop good setting/home/community links and shared activities.

G. To encourage all staff to fulfil their health promoting and ecological sustainability role, through staff development and training.

H. To develop and implement coherent health activities and experiences.

I. To establish good links with associated settings and schools to ensure smooth transition.

J. To develop the setting as a health promoting workplace with a commitment to the health and well-being of all staff.

K. To develop consistent complementary policies and practice which reflect a positive approach to health and the environment

L. To develop partnerships with appropriate outside agencies and individuals, for advice and active support for health promotion and planning in the setting.

M. To ensure all children in the care of the setting have their rights respected.
PRELIMINARY PHASE
Preliminary Phase

This section reflects the importance of a co-ordinated, comprehensive and progressive approach to the health and wellbeing 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.

It is recognised that not all settings will employ staff therefore local umbrella organisations and agencies will take account of this regarding minimum requirements below.

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, 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 e.g. displays, signs, scrap books.

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

<table>
<thead>
<tr>
<th>Assessment Questions</th>
<th>Examples</th>
<th>Evidence of things we have done (D O N)</th>
<th>Signed Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assessment Questions</strong>&lt;br&gt;All of these questions need to be addressed</td>
<td><strong>Examples</strong>&lt;br&gt;These are ideas of things you might like to consider, you are not expected to do all of them</td>
<td></td>
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<tr>
<td><strong>1</strong> Have the full support of the manager/owner/management committee/leader of the setting, to ensure all staff are involved.</td>
<td>- Local scheme sign up form &lt;br&gt;- Healthy and Sustainable Pre Schools Scheme on staff meeting agenda</td>
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<td><strong>2</strong> A designated scheme coordinator whose key responsibilities are defined, who will work with the local co-ordinator.</td>
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<td><strong>3</strong> Undertake a review of health, well being and sustainability activities within your planned programme in order to identify current strengths and gaps.</td>
<td>- Audit tool</td>
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<td><strong>4</strong> Settings consider local health priorities or local health issues in planning</td>
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<td><strong>5</strong> Promote partnership working appropriate to health improvement.</td>
<td>- Communities First, Change4life, Health Visitor, Health Promotion Library.</td>
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<td></td>
<td>The provision of welcome packs that promote information on childhood immunisation, illness absence guidelines, smokefree premises and registration with health professionals.</td>
<td>- Registration with Doctors, Health visitor, Dentist, Optician.</td>
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</table>
| 7 | Notification to parents/carers about your involvement in the Healthy and Sustainable Pre School Scheme and importance of health and well being. | - Welcome pack  
- Mission statement / purpose  
- Aims / vision  
- Letters / newsletters  
- Healthy and Sustainable Pre School Schemes leaflet or information sheet in welcome pack |
| 8 | All staff receive statutory training on safeguarding. | - |
|   | Supporting the completion of relevant data for local/national reporting to show progression and improvement. | - Questionnaires  
- Local database |   |
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<tbody>
<tr>
<td>Desirable considerations:</td>
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</table>
|   | Setting keeps record of immunisation status of all children and staff. | - Admission forms for children  
- Staff induction and enrolment |   |
Nutrition and Oral Health

This section reflects 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.

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, 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 e.g. displays, signs, scrap books.

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

<table>
<thead>
<tr>
<th>Assessment Questions</th>
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</tr>
</thead>
</table>
| **1.1** Policy in place, which is regularly reviewed and updated, to guide your work on nutrition and oral health and special diet provision? | - Designed to Smile protocol or oral health policy  
- Having one person responsible for nutrition in the setting  
Food policy in place which includes:  
- Meal and/or snack & drink provision  
- Healthy packed lunch promotion  
- Provision for special diets  
- Food for celebrations, outings & food brought in  
- Allergy information  
- The eating environment  
- The use of Section 8 of WG Food and Health Guidelines for Early Years and Childcare Settings (2009) | | |
### Planning & Delivery

<table>
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<tr>
<th><strong>Assessment Questions</strong></th>
<th><strong>Examples</strong></th>
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<th><strong>Signed Date</strong></th>
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</thead>
</table>
| **2.1** Activities and experiences provided which involve children in making decisions about healthy food choices and trying new foods? | - Offer a variety of fruit and vegetables on a daily basis  
- Reward children who try them  
- Smell, touch and taste games with appropriate foods from the food groups e.g. feely game, fruit and vegetable printing, snack time | | |
| | | Evidence of things we have done (D O N) | |
| | | | Signed Date |
- ‘Play food’ resources in play activities, play kitchens and resources
- Involve children in helping to prepare and serve meals and snacks
- ‘Food, Fun and Active Play for Tiny Tots’ resource
- Food themed stories, songs, books, jigsaws and celebrations
- Role-play games e.g. cooking and shopping
- Growing of fruit and vegetables
- Learn about the importance of a balanced diet
- Trying foods from different countries/learn about cultures

2.2 How do you incorporate dental/oral health promotion and dental hygiene into the life of the setting & staff?

- Designed to Smile supervised tooth brushing programme and its required standards, if eligible
- Age appropriate activities that help children learn about good oral health
- Brush your teeth activities
- Role play, dentist
- “People who help us” topic, dentist or dental nurse visit
<table>
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<tr>
<th>2.3</th>
<th>How do you encourage healthy cooking skills?</th>
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<tr>
<td></td>
<td>- Free flow cups from 6 months</td>
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<td></td>
<td>- Lidless cups from 12 months</td>
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<td></td>
<td>- Use of dummies</td>
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<td></td>
<td>- Tooth friendly snacks and drinks</td>
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<td></td>
<td>- Children help prepare and serve their own snack</td>
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<td>- Planned cooking activities for children e.g. making dough, preparing fruit and vegetables, basic food preparation</td>
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<td>- Celebration food/cooking e.g. pancake day, leek and potato soup on St David’s Day</td>
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<td></td>
<td>- Prepare and cook vegetables grown in the garden with children</td>
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<td>- Food from around the world – healthy option such as noodles or stir fry</td>
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<td>- Use examples in Food, Fun and Active Play for Tiny Tots, and other local resources</td>
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<table>
<thead>
<tr>
<th>2.4</th>
<th>What local / national initiatives are you involved in that promote the nutrition and oral health of children or parents/carers?</th>
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<tbody>
<tr>
<td></td>
<td>- Designed to Smile where eligible</td>
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<td></td>
<td>- Change for Life</td>
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<td></td>
<td>- Healthy Start</td>
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<td></td>
<td>- Local food and nutrition award</td>
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<td>- Local healthy snack award</td>
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2.5 How do you ensure consistent messages are provided/mixed messages are avoided in relation to food and health across the whole setting, so that messages taught are consistent with food and drink provided?

- Staff role models e.g. during snack/lunch staff eat healthy food and drink with children
- Children are not rewarded with food
- Avoid the influence of promotional campaigns and branded products that conflict with healthy messages
- Consistency across all food and drink provision e.g. parties, celebrations, food and play activities, food brought in
- Incorporate the wider environment in the food policy e.g. food on trips and during out of setting activities

### Ethos & Environment

<table>
<thead>
<tr>
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<td>All of these questions need to be addressed</td>
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</table>
| 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? | - Parent/carer questionnaires for views about food provision  
- Staff meetings to discuss food provision and healthy eating activities |                                        |             |
Child initiated planning for food activities. Includes food tasting, sad/smile faces for food preferences etc. Children and staff eat snacks and meals together at the table. Snack and lunch/tea times are pleasurable, social experiences. Praise and/or reward children with positive behaviour at eating time. Allocate sufficient time to eat. Place mats for each child and appropriate cutlery. Children serve themselves and do activities e.g. spread own bread, pour milk. Non-food based reward schemes. Food posters on walls and food displays.

| 3.2 | How do you source local and seasonal food whenever possible? | - Local fruit and vegetable supplier, local farm shop. 
- Allotment activities - planting. 
- Change menu to match seasonal foods available. |
| 3.3 | How do you ensure that portion sizes are appropriate? | - Information received from the Level 2 Agored Cymru Community Food and Nutrition Skills Course for the Early Years. |
| **3.4** | **How do you ensure that the setting provides an environment which promotes and is supportive of breastfeeding?** | **- Role modelling e.g. play and dolls**  
**- Stories that include breastfeeding and ask children about their siblings who are breastfed**  
**- Mothers are welcomed and made comfortable to breastfeed in the setting**  
**- Make use of the Unicef Baby Friendly Initiative**  
**- Breast feeding information displayed in the setting and made available to parents, e.g. Unicef Baby Friendly Initiative resources**  
**- Include links to information about breastfeeding and returning to work in information for new parents (Welsh Government website and maternity action website)**  
**- Include in risk assessment discussion for pregnant staff, information about breastfeeding and returning to work**  
**- Welsh Government Food and Health Guidelines for Early Years and Childcare Settings (2009), section 2** |
### Family & Community Involvement

<table>
<thead>
<tr>
<th>Assessment Questions</th>
<th>Examples</th>
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</thead>
</table>
| How do you actively encourage the provision of healthy lunch boxes and meals provided from home, and provide information to children and parents/carers where appropriate? | - Healthy packed lunch policy  
- Healthy packed lunch displays  
- Healthy packed lunch leaflets given to parents/carers  
- Family cooking activities |  |  |
| How do you teach children how to wash hands and the importance of good hand washing before eating? | - Hand washing activities through songs and posters  
- Hand washing is part of daily routine for children and staff before preparing or eating any food |  |  |
| Are tables cleaned with sanitiser prior to, and after, serving and eating food? |  |  |  |

#### 3.5
- Parent/carer questionnaires asking for relevant support  
- Work with the Community Dental Service, Health Visitor, Dieticians, speech and language  
- Visits to local supermarkets with the children  
- Visit to local allotments with children
<table>
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<tr>
<th>4.2</th>
<th>What information do you provide for parents / carers about the importance of good nutrition and oral health?</th>
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<tbody>
<tr>
<td></td>
<td>- Visit to local farms, food suppliers with children</td>
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<td></td>
<td>- Newsletters, website and/or displays include nutrition and oral health information e.g. menus, snack list, leaflets, food policy</td>
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<td></td>
<td>- Parents/carers evenings/sessions. Speakers to come in to discuss food, nutrition or oral health</td>
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<tr>
<td></td>
<td>- Food tasting sessions for parents, i.e. recipes from the menu</td>
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<td></td>
<td>- Make recipe books for parents/carers</td>
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<td></td>
<td>- Recipes are made available for parents/carers to try at home e.g. recipe of the week/month</td>
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<tr>
<th>4.3</th>
<th>How do you actively engage with parents/carers to relay information on children's acceptance of new foods?</th>
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<tbody>
<tr>
<td></td>
<td>- Feedback in daily diaries about what the child has eaten</td>
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<td>- Verbal feedback about what child has eaten from keyworkers</td>
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<td></td>
<td>- Displays with what children have eaten today/this week</td>
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<td></td>
<td>- Displays of children involved in food related activity</td>
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<td></td>
<td>- Share recipes that children have enjoyed with parents/carers</td>
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<td></td>
<td>- Send photos home of children eating new foods</td>
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</tbody>
</table>
### 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 WG Food and Health Guidelines for Early Years and Childcare Settings.

<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| 5.1 Fresh drinking water is freely available to children at all times | - Water cooler  
- Water bottles with name/picture of child  
- Water jugs and cups available all day | | |
| 5.2 Drinks between meals are plain water; and milk at break times | - Menu and observation | | |
| 5.3 A variety of nutritious snacks are available in line with recommendations | - Menu and observation  
- See WG Food and Health Guidelines For Early Years and Childcare Settings for guidance on portion sizes (Section 6, p 13) | | |
| 5.4 Where main midday and/or evening meals are provided, then these meals should include fruit and vegetables | - Menu and observation  
- See WG Food and Health Guidelines For Early Years and Childcare Settings for guidance on portion sizes (Section 6) | | |
<table>
<thead>
<tr>
<th>Section</th>
<th>Requirement</th>
<th>Guidance</th>
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</table>
| 5.5     | Where main midday and/or evening meals are provided, then these meals should include meat, fish, or a suitable alternative (e.g. eggs, pulses, non-dairy alternative) | - Menu and observation  
- See WG Food and Health Guidelines For Early Years and Childcare Settings for guidance on portion sizes (Sections 3 & 6)  
- Evidence of working towards this requirement is acceptable in the first year with full compliance in year two |
| 5.6     | Processed meat and fish options served no more than twice a week | - Menu and observation  
- See WG Food and Health Guidelines For Early Years and Childcare Settings for guidance on portion sizes (Sections 3 & 6) |
| 5.7     | Salt should not be added to cooking or at the table. Products high in salt, such as packet soups, stock cubes and packet sauces should be avoided | - Menu and observation  
- See WG Food and Health Guidelines For Early Years and Childcare Settings for guidance on menu planning (Section 2 p.11 & Section 6 p.7) |
PHYSICAL ACTIVITY / ACTIVE PLAY
Physical Activity & 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, 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 e.g. displays, signs, scrap books.

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

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</table>
| Policies in place, which are regularly reviewed and updated, to guide your work on physical activity and play? | - Physical activity/active play policy  
- A designated member of staff responsible for activity and play | | |
| Physical activity and active play training/mentoring that staff have received and how has this influenced practice? | - Playworker training (NVQ)  
- Play to Learn  
- Play or movement training Sports Leaders training  
- Local play or physical activity training  
- Baby Massage  
- Practice has changed by…. | | |
### Planning and Delivery

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</table>
| 2.1 What activities and experiences do you provide which encourage children to play and be physically active on a daily basis? | - Including physical activity and play in planning and daily routine.  
- Free choice of play and activities  
- Children involved in planning daily routines  
- Use ‘Food, Fun and Active Play for Tiny Tots’  
- Use ‘Play to Learn’  
- Utilising locally available physical activity and play resources  
- Yoga sessions  
- Baby massage  
- Daily dance sessions or daily action songs  
- Promote 60 minutes a day of physical activity message  
- Outdoor play areas, adventure play equipment, climbing wall, slide, swings  
- Bikes and scooters  
- Sports and dance taster sessions for children | | |
| 2.2 | How do you plan for regular active play for babies? | - Opportunities for babies to roll, be on their front, reach out for toys
- Benches for walking to improve balance, opportunities to climb |
| 2.3 | What local / national initiatives are you involved in that promote physical activity and active play for children or parents/carers? | - Charity events e.g. Barnardo’s Toddle, British Heart Foundation events
- Beep Beep Day
- Play to Learn
- Activities linked to events e.g. Olympics, Commonwealth Games, Six Nations etc |
| 2.4 | How do you ensure that consistent messages are provided/mixed messages are avoided in relation to, physical activity and play? | - Provide appropriate clothing and footwear
- Staff role models e.g. walk, get involved in games and dancing
- Walk where possible to places of interest
- Active play and dancing is part of daily routine
- Staff induction, training and appraisals/observations include physical activity and active play |
| 2.5 | 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? | - Risk assessments and risk management
- Opportunities for children to assess risk |
### Ethos and Environment

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</table>
| **3.1** How do you create an environment that encourages physical activity and active play and how do you involve the children? | - Parent/carer questionnaires for views about active play  
- Staff meetings to discuss active play  
- Child initiated planning / choice or activity board  
- Circle time to discuss play activities  
- Portable play equipment-balls etc  
- Music and movement  
- Zoned play areas, e.g. living garden, messy play  
- See 2.1 – outdoor play areas, bikes and scooters  
- Child led play | | |
| **3.2** How do you ensure that water is freely available and consumption is actively promoted during and after activity? | - Free access to water at all times  
- Children have their own water bottles | | |
| 3.3 | How do you ensure children wash their hands after playing outside and after activities, especially water and sand play? | - Daily routine includes hand washing after play sessions |
| 3.4 | What play equipment do you use which is made from recycled or reused materials? | - Junk modelling - Tyres, logs, assault courses |

**Family and Community Involvement**

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<p>| 4.1 | How do you engage with individuals, outside agencies, businesses and/or members of the community that support physical activity and active play? | - Parent/carer questionnaires asking for relevant support - Play Wales, National Parks Wales, Foundation Phase Adviser - Leisure centre visits with children e.g. swimming - Local sports coaches or clubs and fitness instructors deliver sessions with children weekly e.g. dance, yoga, football - Language &amp; play sessions | |</p>
<table>
<thead>
<tr>
<th>4.2</th>
<th>What information do you provide for parents / carers about the importance of physical activity and active play for themselves and their children?</th>
</tr>
</thead>
<tbody>
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<td>- Newsletters, website and/or displays include information e.g. activities that are available at the leisure centre, local sports clubs and fitness classes, information about the benefits of activity</td>
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<td></td>
<td>- Change For Life Resources e.g. Walk For Life, Ready Steady Go</td>
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<tr>
<td></td>
<td>- Fun Food and Active Play</td>
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<td></td>
<td>- Parents/carers evenings or sessions, speakers to come in</td>
</tr>
<tr>
<td></td>
<td>- Asking parents/carers to partake in voluntary activities or sponsored activities with the children</td>
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<tr>
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<td>- Toy Library, Home Task</td>
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</table>
Mental & Emotional Health, Wellbeing & Relationships

This section reflects the ethos of the setting which should encourage mutual respect and promote the mental and emotional wellbeing, 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, 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 e.g. displays, signs, scrap books.

N Narrative – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.
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<td><strong>1.1</strong> Policies in place, which are regularly reviewed and updated, to guide your work on mental and emotional health, wellbeing and relationships, and dealing with sensitive issues?</td>
</tr>
<tr>
<td><strong>1.2</strong> How do you ensure a consistent approach to behaviour management?</td>
</tr>
<tr>
<td>Planning &amp; Delivery</td>
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| **2.1** Activities and experiences provided which support children’s social and emotional development, communication skills and diversity? | - Circle time and small group work  
- Every child has an opportunity for their voice to be heard  
- Promoting early attachment  
- Set daily routine so that children feel safe and secure  
- Children are aligned to key workers  
- ‘Settling in’ process | | |
| 1.3 Provide evidence of mental and emotional health and well-being training staff have received and how has this influenced practice? | - Circle time training  
- Attachment theory training  
- Mental health awareness training, e.g. 5 ways to Well-Being  
- Behaviour management training  
- Bereavement and loss training  
- Diversity training  
- Practice has changed by…. | | |
| 2.2 | How do you provide babies and children less than 2 years of age with the opportunity to interact with a consistent adult at frequent intervals and substantial periods of time during the day? | - Key worker system  
- Key worker display  
- Settling in review |
| 2.3 | How do you provide quiet areas to meet the sleep needs of individual children (day care settings only)? | - A quiet room, cots, dim lighting  
- Liaising with parents/carers and link with the home routine over sleep times |
| 2.4 | Local / national initiatives that you are involved in, that promotes self esteem of children or parents/carers? | - Health awareness days / weeks e.g. mental health awareness week  
- Mindfulness  
- Baby massage  
- Parent/carer nurturing groups  
- Language and play sessions |
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| 3.1 How do you create a pleasant, safe, sociable and responsive nurturing environment and how do you involve children? | - Staff meetings to discuss emotional health and well-being  
- Each child has their own space to keep coats and belongings  
- Children have a sense of ownership over parts of the setting  
- Daily routines that promote security and independence  
- Positive rules that children contribute to and understand  
- Transition arrangements  
- Children’s work and displays at child height  
- Calm environment e.g. use of music, neutral colours  
- Rights and voice of the child | | |
| 3.2 How do you provide opportunities for children to promote / encourage confidence, self-esteem and wellbeing of themselves and others? | - Child initiated planning  
- Every child receives praise; rewards system in place (non-food)  
- Circle time or small group work | | |
- Every child has an opportunity for their voice to be heard
- Children’s’ roles and responsibilities are clear, e.g. a ‘special’ job for the day
- Activities that promote independence e.g. own pegs, serving own snacks and drinks, wipe own face after snacks, blow own noses, hand washing

3.3 How do you ensure all staff and visitors support the policies and practice of the pre-school setting?

- Policies available on website or in folder for parents/carers to see
- Policies in staff hand book and induction
- Visitor book
- Behaviour rules signs
- Notice board for parents/carers or staff
- Checklist for visitors to sign
## Family & Community Involvement

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| **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 mental and emotional health, wellbeing and relationships? | - Support and advice sought from Educational Psychologist, Health Visitors, Early Education Teachers, Bereavement Support when needed  
- Parent/carer questionnaires asking for relevant support | | |
| **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 it shared? | - Newsletters, website and/or displays include information e.g. behaviour policy, mental health awareness  
- Consistent approach to behaviour management is discussed with parents/carers  
- Daily record sheets / diaries given to parents/carers  
- Information about mental health and well-being included in newsletters and notice boards  
- Parenting programmes | | |
Environment

This section reflects the promotion of 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.

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

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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 e.g. displays, signs, scrap books.

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## Leadership and Communication

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### 1.1 What policies or action plans do you have in place, which are regularly reviewed and updated, to reduce your impact on the environment?
- Environment / eco policy which includes involving children in the ‘5’ R’s process - reduce, reuse, recycle, repair and respect
- Environment / eco action plan
- Environment / eco code
- Designated member of staff with responsibility for environmental actions

### 1.2 What environmental issues and global awareness training have staff received and how has this influenced practice?
- Gardening training
- Eco Schools training
- Outdoor learning training
- Forest Schools training
- Beach Schools training
- Local county council visit/talk
- Practice has changed by….
<table>
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</table>
| 2.1 What activities and experiences do you provide, which encourage children to make decisions about reducing their impact on the environment? | - Activities that include waste minimisation (reusing, recycling, composting) and caring for the environment, energy and water saving and travel to setting, global awareness etc  
- Junk modelling  
- Growing and nurturing plants and food  
- Feeding birds, looking after animals e.g. chickens  
- Mini-beast surveys  
- Mud kitchen  
- Outdoor mark making  
- Children as compost monitors, light monitors  
- Incentives to reward children’s involvement e.g. stickers when the lights are turned off  
- Environmental art  
- Singing eco songs, eco stories, role play etc | | |
<table>
<thead>
<tr>
<th>2.2</th>
<th>What local / national initiatives are you involved in that promote environmental issues for children or parents/carers?</th>
</tr>
</thead>
</table>
|     | - Eco Schools  
|     | - Keep Wales Tidy day  
|     | - Forest Schools  
|     | - Beach Schools  
|     | - Visits to community allotment, community gardens, garden centre, local farm, beach, woodland, RSPB etc  
|     | - Getting involved in local events/carnivals and festivals  
|     | - Community recycling |

<table>
<thead>
<tr>
<th>2.3</th>
<th>How do you monitor improvements?</th>
</tr>
</thead>
</table>
|     | - Smiley check sheets  
|     | - Reduction in bags of waste e.g. food  
|     | - Visual displays of savings against the 5 R’s  
|     | - Before and after pictures of changes to an area |

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<th>2.4</th>
<th>How do you ensure consistent messages are provided/mixed messages are avoided in relation to environmental issues?</th>
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</table>
|     | - Staff role models e.g. recycle, compost, switch lights off  
|     | - Setting rules/poster are consistent with environment policy e.g. switch off lights, reuse paper  
|     | - Practice complements learning i.e. lights switched off, paper recycled, push taps  
|     | - Electronic communication – use of email  
<p>|     | - Social media |</p>
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<tr>
<th>2.5</th>
<th>How do you respond to locally identified environmental issues (where appropriate)?</th>
<th>- Flexibility in planned activities, e.g. change in weather/flooding, litter thrown into premises / animal fouling</th>
</tr>
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**Ethos & Environment**

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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?

- Environmental audit e.g. Eco-Schools Wales
- Parent/carer questionnaires for views about the environment
- Suggestion box
- Staff meetings to discuss improving the setting environment
- Clear signage and information
- Setting arranged in to zones or areas
- Correct indoor temperature maintained
- Calm environment, clutter free
- Displays at child height
- Parent/carer displays
- Pegs at child height with photos
- Developing gardens/planters

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</table>
| 3.2 | How do you actively encourage the reduction of waste and litter, promote waste management and choose products with minimal packaging? | - Bulk buying  
- Use recyclable/compostable packaging and re-usable bags  
- Newsletters sent by email or on website or reduced to A5  
- Do not use disposable plates and cups  
- Food waste is composted  
- Paper and cardboard is re-used and recycled  
- Plastic, metal and glass is recycled  
- Encourage the use of package free packed lunches  
- Use of local fruit and veg shop |
| --- | --- | --- |
| 3.3 | How do you actively encourage the users of the setting to use sustainable forms of transport? | - Staff car share  
- Walk to local areas of interest instead of using mini-bus  
- Provide bus/train timetable in welcome pack or on displays |
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</table>
| **4.1** How do you engage with individuals, outside agencies, businesses and/or members of the community to support environmental activities? | - Parent/carer questionnaires asking for relevant support  
- Visiting garden centres, waste management and recycling plants  
- Utilising workshop providers, local environmental groups/allotment societies  
- Eco-Schools, Early Years Teachers  
- Forest Schools  
- Beach Schools  
- Natural Resources Wales  
- Keep Wales Tidy |                                                                      | |
| **4.2** What information do you provide for parents / carers about the importance of environmental initiatives in the setting? | - Newsletters, website and/or displays include information e.g. recycling, gardening, eco policy/code |                                                                      | |

- Bike/scooter racks / bike/scooter storage area  
- Somewhere to store pushchairs  
- Walk to nursery event
<table>
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<tr>
<th>4.3</th>
<th>How do you ensure that all members of the setting community comply with policy with regard to smoke free environments, to include e-cigarettes?</th>
</tr>
</thead>
</table>
|     | - Open gardening day with parents/carers and children  
|     | - Parents/carers accompany children on visits to e.g. garden centres, farms, RSPB  
|     | - Signage  
|     | - Policy  
|     | - Information notice board, newsletters, website  
|     | - Awareness about smokefree cars/homes  
|     | - Promote Stop Smoking Wales  
|     | - Smoke Free Playgrounds |
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 is also included in this section but should be considered as a health issue and not just a safety issue.

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| **1.1** Policies, procedures and/or risk assessments in place, which are regularly reviewed and updated, and have a named person responsible to guide your work in all aspects of safety? | In addition to statutory policies:  
- Sun safety  
- E-safety  
- Mobile phones and internet  
- First aid  
- Administration of medication  
- Road safety  
- Outings policy  
- Food, including allergens safety  
- Playground safety  
- Lone working  
- Smoking, e-cigarettes, alcohol and other substance use or misuse  
- Immunisation, including the management of outbreaks  
- DBS and reference checks for staff  
- Fire safety and evacuation | | |
1.2 How do you monitor and record procedures?

- Safeguarding referral guidance is available for staff to see e.g. staff noticeboards, staff room, staff handbook
- E-safety logs
- Sickness register, and log of reported outbreaks to Health Protection
- Visitor book
- Accident and incident book, which includes informing parents/carers
- Accident book regularly reviewed for patterns
- Administration of medicine and consent forms
- Photograph/publicity consent form
- Risk assessments regularly reviewed
- Regular health and safety inspections
- Reports from other organisations that refer to safety
- Relevant staff meeting minutes discussing safety
- Procedures to ensure first aid box is checked
- Fridge temperature records
- Allergen chart / information
- Outdoor area visual checklist
| 1.3 | Safety related training that staff have received and how has this influenced practice? | - List of recent training relevant to policies in 1.1  
- Staff induction includes safety  
- Practice has changed by…. |
| 1.4 | How do you ensure there are sufficient numbers of staff trained in first aid on the premises for the care of infants and young children? | - First aid training evidence  
- Staff Rota’s ensure sufficient first aid cover  
- Clear designated staff roles |
| 1.5 | How do you ensure written parental/carer permission is obtained regarding emergency medical advice or treatment? | - Welcome Pack - admissions application / consent form includes consent for emergency medical treatment |
| 1.6 | How do you respond to incomplete immunisation status of children and staff? | - Immunisation list referred to in an event of an outbreak  
- General information on immunisations in newsletters / notice boards |
| 1.7 | How do you ensure that the cleaning products and chemicals used on site are used and stored correctly? | - Product storage, inaccessible to children  
- Care of Substances Hazardous to Health (COSH) file  
- Cleaning procedures refer to safe storage and use of products  
- Health and Safety Policy  
- Risk Assessments |
1.8 How are parents/carers/staff provided with guidance on hygiene and safe storage of lunch boxes

Information is provided in:
- Parent/carer packs
- Notice board
- Website
- Letters and newsletters
- Staff handbook

### Planning and Delivery

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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?

- Circle time
- Setting rules
- Walking procedures
- Evacuation procedure practice
- ‘People who help us’ topic
- Home safety (medicines / household products / legal and illegal substances)
- Road safety skills
- Sun safety activities
- Healthy body
- Safe touch
- Role play, stories
- Tidy up time
## Ethos and Environment

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| **3.1 How do you create a safe learning environment and how do you involve the children?** | - Staff meetings to discuss safety improvements  
- See policies and procedures in 1.1, 1.2, 1.4  
- Visitor book  
- Tidy up time  
- Clutter and hazard free  
- Rules for each area of play | | |

---

2.2 What local / national initiatives are you involved in that promote safety of children or parents/carers?
- Child Safety Week  
- Road Safety Week  
- Sun Safety Week  
- Safer Internet Day

2.3 How do you ensure that consistent messages are provided/mixed messages are avoided in relation to all aspects of safety?
- Staff role models e.g. no smoking, no consumption of alcohol, use of sunscreen and hats  
- Staff training  
- Setting rules are consistent with safety policies
| 3.2 | How do you ensure all staff and visitors support the policies and practice of the pre-school setting? | - Policies available on website or in folder for parents/carers to see  
- See 2.3 also for consistent messages  
- Staff induction includes safety policies, procedures, risk assessments and responsibilities  
- Staff handbook includes safety policies, procedures, risk assessments and responsibilities  
- Staff sign safety policies and procedures to say that they understand them  
- Updates to safety policies, procedures and risk assessments discussed at staff meetings  
- Visitor book  
- Safety signage around setting e.g. walk on stairs, check play equipment before use  
- Notice board  
- DBS checks |
| 3.3 | How do you ensure the whole setting environment, including the outside area, is a smoke free zone including e-cigarettes? | - Signage  
- Policy  
- Information notice board, newsletters, website  
- Awareness of smokefree cars |
<table>
<thead>
<tr>
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<td></td>
</tr>
</tbody>
</table>
| 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? | - Parent/carer questionnaires asking for relevant support  
- Care and Social Services Inspectorate Wales (CSSIW)  
- National Day Nurseries Association (NDNA), Wales Pre-School Providers Association (WPPA), Professional Association for Childcare and Early Years (PACEY), Mudiad Meithrin, Clybiau Plant Cymru  
- Health visitors  
- Reference agencies that have supported policy development  
- Fire Service  
- Police  
- Nurse  
- Ambulance  
- Lollipop person  
- Child Accident Prevention Trust |  |  |
4.2 How is information provided for parents / carers about substances and smoking and importance of safety?

- Newsletters, websites and/or displays include information e.g. car seats, sun safety, water safety, smoking cessation
- Smokefree information in welcome pack
- Smokefree cars awareness
- Smokefree homes
- No smoking day promotions
- Stay and play sessions
- Illness absence information
- Illness outbreak information is sent to parents/carers e.g. measles outbreak
- Immunisation information shared with parents/carers
- Access information from the Child Accident Prevention Trust website to share with parents/carers
- Open day with partners
HYGIENE
Hygiene

Good hygiene is crucially important to early years settings and relevant hygiene advice from ‘Infection Prevention and Control for Childcare Settings (0 – 5 years)’.

http://howis.wales.nhs.uk/sitesplus/888/page/62043#setting

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, 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 e.g. displays, signs, scrap books.

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

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<thead>
<tr>
<th>Assessment Questions</th>
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</thead>
</table>
| **1.1** What hygiene policies, procedures and / or risk assessments do you have in place to guide your work on hygiene and infection control? | - Named person responsible for hygiene or aspects of it  
- Hygiene policy  
- Food safety policy  
Hygiene procedure or risk assessment examples (see ‘Infection Prevention and Control for Childcare Settings (0 – 5 years)’):  
- Use ‘Food Standards Agency Wales: ‘Safer food, better business’ (SFBB) for caterers (nurseries) and child minders  
- Kitchen hygiene, food preparation and storage  
- Bottle preparation and feeding and storage of breast milk  
- Hand washing  
- Premises cleaning schedules, instructions and check lists  
- Toy and equipment cleaning schedules | | |
<table>
<thead>
<tr>
<th>1.2</th>
<th>How do you monitor and record and review hygiene policies and procedures?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Risk assessments regularly reviewed</td>
</tr>
<tr>
<td></td>
<td>- Regular health and Safety inspections</td>
</tr>
<tr>
<td></td>
<td>- Reports from other organisations e.g. CSSIW inspections</td>
</tr>
<tr>
<td></td>
<td>- Environmental health inspections</td>
</tr>
<tr>
<td></td>
<td>- Relevant staff meeting minutes</td>
</tr>
<tr>
<td></td>
<td>- Signing sheets for cleaning</td>
</tr>
<tr>
<td></td>
<td>- Signing sheets for toilet monitoring</td>
</tr>
<tr>
<td></td>
<td>- Fridge temperatures recorded daily</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.3</th>
<th>How have you considered the ‘Infection Control Audit Tool for Childcare settings’ and implemented the recommendations where applicable?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Completed the audit tool and sent to Environmental Health/ Public Health Wales – Health Protection Team</td>
</tr>
<tr>
<td>1.4</td>
<td>Explain what hygiene related training staff have received and how has this influenced practice?</td>
</tr>
<tr>
<td>-----</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>- Food Safety training</td>
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<tr>
<td></td>
<td>- Local hygiene training</td>
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<td></td>
<td>- Local hand washing training</td>
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<tr>
<td></td>
<td>- Induction includes hygiene training and information</td>
</tr>
<tr>
<td></td>
<td>- Staff meetings include discussion about hygiene</td>
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<td></td>
<td>- Practice has changed by…</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>1.5</th>
<th>How do you incorporate flexibility to respond to locally identified issues (where appropriate)?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Follow section 6 (Reporting Infectious Disease Outbreaks) of the ‘Infection Prevention and Control for Childcare Settings’</td>
</tr>
<tr>
<td></td>
<td>- Illness outbreak letters sent to parents/carers during illness outbreaks e.g. measles</td>
</tr>
<tr>
<td></td>
<td>- 48 hours exclusion for sickness and diarrhoea outbreaks</td>
</tr>
<tr>
<td></td>
<td>- Head lice letters/leaflets sent to parents/carers</td>
</tr>
<tr>
<td>Assessment Questions</td>
<td>Examples</td>
</tr>
<tr>
<td>-----------------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
| What activities and experiences do you provide, which encourage good hygiene with the children? | - Cooking activity includes food safety, wearing aprons, tying hair back, hand washing etc  
- Food / messy play activities are risk assessed  
- Outdoor play/gardening includes hand washing, wearing overalls, wellies and gloves  
- Hand washing activity  
- Personal hygiene activity or circle time  
- Tooth brushing activity  
- Hygienic nose blowing, sneezing, coughing and tissue disposal activity  
- Pets activity includes hand washing afterwards (refer to section 22 of ‘Infection Prevention and Control for Childcare Settings’) | |

Signed Date: 

Signed Date: 

Signed Date: 

Signed Date:
<table>
<thead>
<tr>
<th>2.2</th>
<th>What opportunities have you taken up to be involved in a range of local and national initiatives?</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>- Designed to Smile</td>
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<tr>
<td></td>
<td>- National Smile Month (May/June)</td>
</tr>
<tr>
<td></td>
<td>- Global Hand Washing Day (15 October)</td>
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<tr>
<td></td>
<td>- Sneezesafe</td>
</tr>
<tr>
<td></td>
<td>- Food Safety Week (June)</td>
</tr>
<tr>
<td></td>
<td>- Food Standards Agency rating</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.3</th>
<th>How do you ensure consistent messages are given/mixed messages are avoided?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Consistent messages are given due to the policies and procedures listed in 1.1</td>
</tr>
<tr>
<td></td>
<td>- Staff as role models, for example they wear aprons with food and when changing nappies, wash hands after working outdoors etc</td>
</tr>
<tr>
<td></td>
<td>- Tissues available at child height in every room</td>
</tr>
<tr>
<td></td>
<td>- Warm water, liquid soap, paper towels available for all children and staff</td>
</tr>
<tr>
<td></td>
<td>- All children wash hands before eating or food preparation</td>
</tr>
<tr>
<td></td>
<td>- Designed to Smile hygiene and infection control guidance followed</td>
</tr>
<tr>
<td></td>
<td>- Trips are risk assessed to ensure they have appropriate facilities for toileting and hand washing</td>
</tr>
</tbody>
</table>
Farm or zoo visits are risk assessed (refer to section 22 of ‘Infection Prevention and Control for Childcare Settings’)

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| How do you ensure all staff and visitors support the policies and practice of the pre-school setting? | - Staff job descriptions show their hygiene responsibilities  
- Duty Rota for cleaning and hygiene  
- See 2.3 also for consistent messages  
- Staff induction includes hygiene policies and procedures  
- Staff handbook includes hygiene policy, procedures and responsibilities  
- Staff maintain hygiene check lists  
- Staff sign all hygiene policies and procedures to say that they understand them  
- Updates to hygiene policies and procedures discussed at staff meetings | | |
<table>
<thead>
<tr>
<th>3.2</th>
<th>What guidance do you display in relation to hygiene and where is it displayed?</th>
</tr>
</thead>
</table>

- Policies available on website or in folder for parents/carers to see
- Hygiene signs around setting e.g. hand washing, checklists displayed, provision of aprons etc

- Explain where answers in 1.1 are displayed in your setting
- Check lists for cleaning, kitchen hygiene, toy and equipment cleaning are displayed (where)
- How and when to wash hands posters by all wash basins
- Illness exclusions are displayed (where)
- Food hygiene rating on door
- Coughs and sneezes / sneezesafe posters
- Nappy disposal
## Family and Community Involvement

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</table>
| **4.1** How do you engage with individuals, outside agencies, businesses and/or members of the community to support hygiene policy, procedures and practice? | - Parent/carer questionnaires asking for relevant support  
- Care and Social Services Inspectorate Wales (CSSIW)  
- National Day Nurseries Association (NDNA), Wales Pre-School Providers Association (WPPA), Professional Association for Childcare and Early Years (PACEY), Mudiad Meithrin, Clybiau Plant Cymru etc  
- Health Visitor  
- Designed to Smile team  
- Environmental Health Officer/Local Health Protection Team visit for the audit tool | | |
| **4.2** How do you provide information for parents / carers about the importance of good hygiene for themselves and their children? | - Newsletters, websites and/or displays include information e.g. hand washing, illness exclusion periods | | |
- Information to parents/carers during outbreaks of e.g. Measles
- Information about a child’s daily hygiene is shared with parents/carers in their diary or verbally via key worker

### Hygiene Standards – Minimum Requirements
These must be put in place in order to achieve the national award criteria for hygiene

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<tr>
<td>5.1 Children and staff have access at all times to toilets that are well ventilated and cleaned regularly</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5.2 Liquid soap and warm water are provided in toilets for children and staff</td>
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<td></td>
<td></td>
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<tr>
<td>5.3 Toilet paper is provided in toilets for children and staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.4 Paper towels are provided in toilets for children and staff</td>
<td></td>
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<tr>
<td>5.5 Guidance is displayed for children and staff on when and how to wash hands</td>
<td></td>
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<tr>
<td>5.6</td>
<td>Sanitary disposal facilities exist for female staff</td>
<td>- e.g. Lidded bins</td>
<td></td>
</tr>
</tbody>
</table>
| 5.7 | Children’s toilets are cleaned and monitored regularly | - Cleaning rota for toilets  
- Signing sheet for cleaning toilets |
| 5.8 | Children wash hands before and after eating and serving food |
| 5.9 | Water coolers are cleaned and maintained regularly (if applicable) | - Water cooler service sheet  
- Setting check sheet for water cooler |
| 5.10 | If children are drinking water from bottles then these are not shared, and there are clear procedures for washing those water bottles | Procedure in place for washing water bottles, e.g.:  
- Bottles are sent home for parents/carers to wash  
- All bottles are put through dishwasher weekly  
- All bottles are sterilized weekly |
| 5.11 | Staff room/kitchen cleanliness is maintained, e.g. microwave | - Staff room cleaning rota |
| 5.12 | Parents/carers are provided with guidance on illness absence | Information is provided in:  
- Parent/carer packs  
- Notice board  
- Website  
- Letters and newsletters |
<table>
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<tr>
<th>Section</th>
<th>Description</th>
<th>Compliance Details</th>
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<tbody>
<tr>
<td>5.13</td>
<td>If setting has been assessed under the Food Standards Agency’s Food Hygiene Rating Scheme, then a rating of 3 or above must be achieved and displayed</td>
<td></td>
</tr>
<tr>
<td>5.14</td>
<td>Facilities are in place for the hygienic preparation of babies’ feeds</td>
<td>- Follow section 21 (Bottle Preparations and Feeding) of the 'Infection Prevention and Control for Childcare Settings'</td>
</tr>
<tr>
<td>5.15</td>
<td>Suitable sterilisation equipment is used for babies feeding equipment and dummies</td>
<td>- Follow section 21 (Bottle Preparations and Feeding) of the 'Infection Prevention and Control for Childcare Settings'</td>
</tr>
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</table>
| 5.16    | Any animals on the premises are safe to be in the proximity of children and do not pose a health risk | - Policy or procedure in place  
- Risk assessment  
- We follow section 22 (Pets and Farm/Zoo Visits) of the 'Infection Prevention and Control for Childcare Settings' |
Workplace Health and Wellbeing

**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 wellbeing of all staff. Good work is important for physical and mental health and wellbeing. Employers who adopt good working practices will have a happy, healthy and productive workforce, with lower levels of 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, 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 e.g. displays, signs, scrap books.

N **Narrative** – this form of evidence includes discussions with any individuals, groups, partner agencies or children during the assessment visit.
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<td><strong>Examples</strong>&lt;br&gt;These are ideas of things you might like to consider, you are not expected to do all of them</td>
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<td></td>
</tr>
<tr>
<td><strong>1.1</strong> What policies do you have in place to guide your work on staff health and well-being?</td>
<td>- Staff health and well-being policy&lt;br&gt;- Work-life balance policy&lt;br&gt;- Flexible working policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1.2</strong> How are staff consulted and involved in the development of a health-promoting workplace?</td>
<td>- Questionnaires about staff health and well-being&lt;br&gt;- Staff meetings to discuss well-being&lt;br&gt;- Ideas box&lt;br&gt;- Staff lead on organising staff well-being and social activities e.g. walking session, staff social</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1.3</strong> How do you ensure staff are involved in policy development and are aware of policies and procedures?</td>
<td>- Staff made aware of policies and procedures during induction&lt;br&gt;- Policies and procedures in staff hand book&lt;br&gt;- Staff sign policies to say they have read them&lt;br&gt;- Policies are reviewed in team meetings as part of quality of care review. All staff can suggest changes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
- Discussed as part of annual appraisals / reviews
- Updated policies and procedures are shared with staff in team meetings. Staff then sign them again
- Training is provided to update staff on policies or procedures

1.4 How do you ensure staff are given opportunities to develop skills, and knowledge of health, safety and wellbeing and how has training influenced practice in the setting?

- Coordinated external and in-house training programme in place
- All staff have access to training
- Stress management training
- 5 ways to wellbeing training, and information given to staff
- Equalities training
- E-learning for courses such as food safety and safeguarding
- Health promotion resources loaned from the Small Workplace Health Award
- Health information such as leaflets and posters available in staff areas/staff health notice board. E.g. Stop Smoking Wales, Dan 24/7, British Heart Foundation
- Training available for staff with areas of responsibility e.g. appraisal training and supervision training for leaders and managers?
- Staff eat healthier
- Staff exercise more
- Procedures developed for dealing with stress
- Staff access health information in their break times
- Actions developed following feedback from training with all staff

### 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

### Evidence of things we have done

(D O N)

### Signed Date

#### 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?

- Regular discussions with manager/team leader
- Regular team meetings
- Regular whole setting meetings
- Appraisals / one to one meetings
- Staff observations
- Open door policy with managers
- Buddy staff together
- Healthy Working Wales, website and Health at Work
- Occupational Health
- Occupational Health Advice Line for managers and staff
| 2.2 | What method do you use for gauging staff satisfaction? | - Staff questionnaires / surveys done annually  
- Team meetings  
- Whole setting meetings  
- Informal discussions  
- Staff reflections |
| 2.3 | What actions have you taken from staff feedback? | - Details of any changes made due to staff feedback or suggestions |

### Ethos and Environment

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<td></td>
</tr>
</tbody>
</table>

| 3.1 | Do staff have designated times for breaks and lunchtimes away from the children? | - Rota / timetable for staff breaks  
- Staff handbook / induction |
| 3.2 | Do staff consider staff room facilities to be adequate (if applicable)? | - Away from children  
- Facilities for cooking making hot drinks etc  
- Seating area and tables  
- Sink  
- Clean and tidy |
<table>
<thead>
<tr>
<th>3.3</th>
<th>Where practical, are their separate toilet facilities for adults?</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4</td>
<td>How do you help staff address work-life balance?</td>
</tr>
<tr>
<td></td>
<td>- Staff handbook</td>
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<tr>
<td></td>
<td>- Flexible working policy</td>
</tr>
<tr>
<td></td>
<td>- Provide advice and guidance</td>
</tr>
<tr>
<td>3.5</td>
<td>How is sickness and return to work managed?</td>
</tr>
<tr>
<td></td>
<td>- Staff handbook</td>
</tr>
<tr>
<td></td>
<td>- Staff contract</td>
</tr>
<tr>
<td></td>
<td>- Sickness policy / return to work policy</td>
</tr>
<tr>
<td>3.6</td>
<td>What activities do you provide to help staff develop confidence, self-esteem and wellbeing of themselves and others?</td>
</tr>
<tr>
<td></td>
<td>- Staff have designated responsibilities to develop confidence</td>
</tr>
<tr>
<td></td>
<td>- Staff take it in turns to organise social events, or weekly activities</td>
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<tr>
<td></td>
<td>- Organised staff well-being information session with guest speakers e.g. drugs and alcohol, Stop Smoking Wales, dietician</td>
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<tr>
<td>3.7</td>
<td>What staff social events are organised?</td>
</tr>
<tr>
<td></td>
<td>- Christmas Party</td>
</tr>
<tr>
<td></td>
<td>- Sponsored walks and events</td>
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<tr>
<td></td>
<td>- Weekly/termly outings or meals</td>
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<td></td>
<td>- Staff meet to exercise together</td>
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<td></td>
<td>- Organised fitness sessions for staff e.g. Zumba</td>
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</tbody>
</table>
### 3.8 How do you communicate with all staff?
- Daily briefing for all staff
- Newsletters
- Pigeon holes for all staff
- Notice board
- White board with messages

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<td>(D O N)</td>
<td></td>
</tr>
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</table>

#### Family & Community Involvement

4.1 What access to specialised services do staff have?
- Workboost Wales
- Health at Work Advice Line
- Occupational Health
- Welsh Backs