

**Children (NI) Order 1995**

# Inspection of Sessional Day Care and Full Day Care

## Questionnaires for Parents using Day Care Settings

*(To be completed by Trust)*

<b>Name of Day Care Setting:</b>	
<b>Age Group of Child:</b>	
<b>Inspector:</b>	

Please comment on the following areas, making your responses

	Excellent	Good	Adequate	Poor
<b>Care</b>				
a) Arrangements for settling in				
b) Range of play provision and equipment				
c) Care, development and play opportunities				
d) Arrangements for outings				
e) Hygiene and health practices				
f) Health and Safety practices				
g) Provision of food and drink				
h) Management of children's behaviour				
i) Working in partnership with parents				
j) Promotion of Equality of Opportunity				
<b>Management</b>				
k) Sharing of policies and procedures				
l) Sharing of information regarding your child				
m) Dealing with issues/complaints				
n) Relationship with management				
o) Overall satisfaction with the care provided				

**Have you been made aware of the settings procedures for Safeguarding and Child Protection?**

<b>Yes</b>		<b>No</b>		
------------	--	-----------	--	--

Comment

**Are you aware who the Designated Child Protection Officer is?**

<b>Yes</b>		<b>No</b>		
------------	--	-----------	--	--

Comment

**Any other comments**

<b>Name (Optional):</b>	
<b>Address:</b>	
<b>Email:</b>	
<b>Daytime Contact Number:</b>	
<b>Date:</b>	

*If you have expressed concerns about the care provided to your child we may wish to contact you to discuss the matter further.*

**Thank-you for your co-operation**