# Oxfordshire County Council Logo Oxfordshire Safeguading Children Board Website

# Day in my Life: Pre-school child

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| **Questions** | **Responses** | **Notes** |
| Waking up in the morning  1. What time do I normally get up? 2. Do I normally sleep well? Am I kept awake by TV, gaming, noisy people or anything else? 3. Am I dry at night, if not, do my carers or someone else help change my sheets or change them for me? 4. Who helps me get up, do I ever/how often do I get myself up? 5. Is there anyone else up when I get up, do I have to get anyone else up? 6. Do I have a morning routine or is everyday different? |  |  |
| Breakfast  1. Do I eat breakfast in the morning, what do I have for breakfast, do I get a choice of what I like? 2. Is there someone to help me make breakfast, eat breakfast, check if I need a clean or change after breakfast? 3. Do I eat my breakfast with others or by myself? 4. Do I eat my breakfast at the table or somewhere else like in front of the TV? 5. Are my parents or carers helping me with breakfast or are they busy with other things? What? |  |  |

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| Dressing  1. Do I have clean clothes, that fit, are they right for the weather and for what I am doing? 2. Does someone help me get dressed or can I do it myself? 3. Do I have help every morning to wash, brush my teeth and take any medicine I need? 4. Do I have help every morning to change nappy, brush hair, cut nails, anything else? |  |  |
| Childcare  1. Do I go to any childcare, do I walk? If I am driven, who takes me and picks me up? 2. Am I taken to childcare on time or am I late sometimes? 3. Do I have meals at my childcare setting? Do I usually eat them well? 4. Do I like my setting? Do I settle well? Do I play with other children? What do I like doing there? 5. Do I see anyone for extra help in the setting? |  |  |
| Health and Development  1. Do I have a health visitor, GP and dentist? 2. Have I been given health and development checks from my health visitor? 3. Am I reaching my age-appropriate milestones? 4. Do I get extra support from any services? Am I always taken to these appointments? Who takes me? 5. Am I able to communicate and express my thoughts and feelings? 6. Am I always taken to all my medical appointments? Who takes me? |  |  |

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| **Questions** | **Responses** | **Notes** |
| Home and Family  1. How much time do I spend at home? Who is there to look after me? Is there anyone else who looks after me other than my main carers? 2. If I have siblings, how is care split between us? 3. Do I watch TV, or use a phone or tablet, and if so, is what I watch or play with okay for my age? 4. Do I have regular mealtimes in the home or out of the home? 5. Do I sit with others in my household for meals? 6. Can I get snacks if I tell somebody I am hungry? 7. Do I have toys and games at home, are they age appropriate / help me to learn, what is my favourite toy to play with? 8. What do my carers do? Do we spend time together or do our own things? 9. Do my carers need any extra support for their own health and wellbeing, and do they always use that support well (in ways that help me)? 10. Have I moved with my family for reasons that were not the choice of my parents/carers (for example: conflict, domestic violence, family breakdown, refugee)? If so, do we have extra support from other services that are aware? 11. Do I have other family members or friends I look forward to visiting? |  |  |
| Bedtime  1. What is my bedtime routine – who helps me get ready for bed? Is it the same every night? 2. Do I have a regular bedtime? 3. Do I have help to brush my teeth before bed? 4. Who checks if need to wash or be changed? 5. Where do I sleep? 6. Do I like where I sleep? |  |  |

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| Bedtime (continued))  1. Who else is in the house at night-time? 2. Do I have my own room, do I share with others, where do I sleep? 3. Do I have what I need in my room (bed, curtains, bedclothes, warm safe place to play)? 4. Do I sleep well at night or do I get up a lot? |  |  |
| Home environment  1. Do I have a safe space that is just for me to play in and relax? 2. Is my house warm enough for me and free of damp and mould? 3. Are my dirty nappies and other waste cleared away and thrown out safely? 4. Is my space free of risky things like lots of clutter, heavy items and pets? 5. Who do I share my space with? Are there lots of adults? Do I know who all of them are? 6. Are items belonging to adults like medication, and heavy items kept safely away from me? 7. Am I kept safe from risky things like vehicles and stairs, and heavy items in the house like TVs and bicycles? |  |  |
| Extra things I might need  1. Do I have any additional or complex needs (e.g. do I have a physical or learning disability; poor mental health; am I an asylum seeker or have been trafficked or am I a young carer) which can impact on my life? 2. Do my parents have additional or complex needs and how does this impact upon me? |  |  |

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| Extra things I might need  1. Do I need extra support to help me reach my full potential? What might that support look like? 2. Do my parents and carers have unmet needs that are getting in the way of giving me support? |  |  |
| Crying  1. Does my carer attend to me as soon as I start to cry or ask for help? 2. Do they help me and meet my needs? 3. Do I respond well to a cuddle and soothing words? |  |  |
| Illness  1. When I am poorly or too ill to go to nursery/childcare who looks after me? 2. When I am poorly does my parent/carer get advice, and do they follow it? 3. Am I taken to all my appointments with the Health Visitor or Doctors? 4. Am I up to date with all my vaccinations? |  |  |

Question list can be edited, extended or reduced to suit family circumstances.

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Oxfordshire Family Solutions