

Happy Hours Out Of School Club Day Care of Children

Ardler Complex
Turnberry Avenue
Dundee
DD2 3TP

Telephone: 01382 828 894

Type of inspection:
Unannounced

Completed on:
10 September 2021

Service provided by:
Happy Hours Out Of School Club

Service provider number:
SP2003000121

Service no:
CS2003000710

About the service

Happy Hours Out of School Club is located in the Ardler area of Dundee. A voluntary group of parents form the committee that runs the service. The after-school service operates from Ardler Community Complex and the breakfast club is based in St. Mary's Community Church Hall.

The service registered with the Care Inspectorate on 1 April 2011. They are registered to provide a care service to a maximum of 74 children at one time of primary school age to 12 years, of whom no more than 24 may attend a before school service at the following premises:

Term time

Monday to Friday - 07:45 to 09:00 - St Marys Community Church Hall, 37 St Kilda Rd, Dundee, DD3 9ND.

Adult: child ratios will be, 3 years and over - 1:8 if the children attend more than 4 hours per day or 1:10 if the children attend for less than 4 hours per day.

Other conditions unique to the service are that the service may also operate from the following premises:

St Marys Community Church Hall 37 St Kilda Rd Dundee DD3 9ND.

The service aims include, but are not limited to, providing "a happy, safe, nurturing and safe environment where all children and their families feel welcome ... [creating] a child-centred setting where the children and young people are encouraged to make decisions, value individuality and provide inclusive play opportunities".

We are testing our new ELC quality framework for day-care of children, childminding and school aged childcare. This inspection was included as part of the test. We have evaluated the service based on key questions and quality indicators linked to the framework. As this was a test, we will not be publishing the evaluations. More information about the quality framework and methodology can be found on our website www.careinspectorate.com

We wrote this report following an unannounced inspection which started on 7 September 2021. We gave feedback to the service virtually on 10 September 2021.

What people told us

We sent the service an online questionnaire to share with parents and carers. We received seven responses. All of those who completed the questionnaire either agreed or strongly agreed that, overall, they were happy with the quality of care their child received while in the service. They commented positively on the staff's communication skills and approachability in particular.

There were 26 children attending the service during the inspection. Most appeared to be settled in the setting, engaging in play with their friends. We spoke to children throughout our visit, some children told us they did not enjoy their time at the club. We raised this with the manager who agreed to explore this further to ensure children outcomes improve.

How good is our care and learning?

1.1 Nurturing care and support

Staff provided examples of strategies that were in place to support children. We found that staff had not created them in partnership with children or parents or recorded these as part of their personal plans. Some parents told us that they did not know about their child's personal plan. This meant essential information about children's needs were not shared effectively and any impact of changes to care were not monitored. The manager agreed to review this, to ensure all children experience consistent care that is right for them and their views and wishes are consulted. **See recommendation 1.**

Children sat together to eat snack when they arrived at the club. This allowed them to chat to each other about their day at school and share stories. Several children asked for more apple, but this was not always given due to insufficient supply. We asked the manager to address this urgently to ensure all children attending the club had access to enough food. They provided evidence to show this had been addressed and we will continue to monitor this as part of their improvement. **See requirement 1.**

Two large bottles of water were shared between children during snack, however this was not enough for them to drink. While outside, children did not have access to water despite it being a hot day. We emphasised the importance of children having access to fresh drinking water throughout their day to prevent dehydration. The manager was asked to address this urgently and provided evidence of water stations being set up outside. We will continue to monitor this as part of their improvement. **See requirement 1.**

We found that children had little involvement in the planning and preparation of snack, resulting in missed opportunities for children to develop independence and life skills. The manager agreed to explore ways in which children could have more responsibility during these times.

We suggested improvements that could be made to the service's permission and administration forms. This included, being clearer about the type of medication and ensuring the dosage is clearly recorded for those administering medication, when required.

1.2 Children are safe and protected

Discussions indicated that staff had not recorded general wellbeing concerns to protect children from harm. This meant that staff were not safeguarding children, as information could not be shared with relevant working professionals when needed. We signposted the manager to our hub to support their understanding of record keeping and information sharing. Documents such as, Getting it Right for Every Child and National Guidance for Child Protection in Scotland 2014 are available to support their understanding of their roles and responsibilities in keeping children safe. **See area for improvement 1.**

We found that staff knew who the child protection officer was within their setting and what they would do if they recognised signs and symptoms of abuse. The manager encouraged staff to complete child protection training, however this was not monitored to evaluate staff's understanding or practice. The manager must include this as part of her quality assurance procedures to ensure staff practice is effective in safeguarding children. **See area for improvement 2.**

1.3 Play and learning

Children were asked to share their likes and dislikes. We found that this had not been acted on; for example, most children had said that they enjoyed art and construction activities, however there were limited opportunities for them to be creative. Staff had provided writing materials but children were told what to draw. This minimised creativity opportunities and for them to have ownership of their work. Staff should respect children's wishes and opinions to enable them to feel valued within the service and enable children to make their own decisions. **See area for improvement 2.**

Most staff did not fully support children to reach their potential and develop lifelong learning skills. This resulted in children having little structure or support in their play. One member of staff told us children were often "left to do their own thing." We found this led to some children resorting to unsafe activities, such as playing in one of the school bins. Staff should ensure that children are given a balance of organised activities and free play, to support them to develop skills and have fun. The manager agreed to improve the toys and games available to children and ensure that the staff improved their interactions to encourage more challenging and meaningful play opportunities. **See area for improvement 3.**

Most of the staff's interactions with children were focused on a task or instruction. As a result, conversations lacked inspiration or opportunities to extend interests and learning. For example, instead of embracing moments for problem solving and risk-taking during play, staff told children to stop what they were doing with little explanation of why. Children would benefit from staff who act on their interests and encourage them to explore their natural curiosities.

Requirements

1. By 20 October 2021, children must be appropriately hydrated and nourished. The provider must ensure:

- a) children have appropriate access to drinking water
- b) children are provided with sufficient healthy and nutritious snacks.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which states that: 'I can drink fresh water at all times.' (HSCS 1.39) and 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables and participate in in menu planning.' (HSCS 1.33).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/10) Regulation 4 (1)(a) Welfare of Users.

Areas for improvement

1. Children would benefit from staff developing their understanding and practice in relation to child protection. We recommend that the manager:

- a) regularly carries out evaluations of staff knowledge and understanding of child protection to ensure training needs are identified and practice is up to date
- b) develops chronologies and use these to support staff to identify and address wellbeing concerns.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which

state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

2.

Children would benefit from more opportunities to achieve their potential through their play and learning experiences. By taking into account their likes, wishes and opinions they will be empowered and feel valued and listened to.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that "as a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling" (HSCS 1.30).

3. Children would benefit from staff promoting a wide range of resources, both indoors and outdoors, that meet their needs and wishes. This would support children's development and enable them to explore their natural curiosities.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'As a child, I can direct my own play and activities in the way that I chose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27).

How good is our setting?

2.2 Children experience high quality facilities

The service had recently moved premises into the local community complex. We found that the environment lacked attention to detail, such as homely touches or decoration. Whilst we recognised that staff and children were within a transitional period of change, the environment should be designed to support a secure and inviting place for children to be. The manager agreed to take immediate action to improve this.

Children were able to use the neighbouring school's playground for outdoor play. We found that children used this space with access to only a few toys, including two balls, foam shapes, drawing materials and board games. These did not deliver a rich stimulating play and learning experience for children, resulting in limited opportunities to have fun and develop skills.

Staff were friendly and approachable with parents, sharing necessary information about their child's day. Parents were familiar with collection points, either meeting children at the gate to the playground or at a fire escape. However, at times during the session, the gate and fire door were left unlocked, risking the potential for children to leave unattended, or for unknown individuals to enter the premises. We read the service risk assessments and found that staff had not taken safety measures detailed within them, such as the management of the door and staff use of walkie talkies to enhance security. The manager had taken immediate action to ensure the safety of children by the time of writing this report, this included installing a doorbell to the rear of the property and addressing staff practice. They agreed to review procedures to ensure staff were clear about their roles and responsibilities for securing the environment to keep children safe. **See requirement 1.**

Staff had not carried out a risk assessment before accessing the school playground. While they were playing in the area, children alerted a member of staff to an uncovered manhole, which exposed a large hole in the ground. Although the member of staff addressed this quickly, opportunities to explore and manage risks were missed. Risk assessments should be carried out with children, to ensure dangers are identified and managed safely. The manager agreed to improve risk assessment procedures within the setting.

Children's personal information was found to be poorly managed and did not comply with current legislation or best practice. Children's contact details were shared without parental consent or consideration of children's safety. This did not respect children's and family's privacy and put them at risk. We signposted the manager to General Data Protection Regulations to improve understanding of their responsibilities in the safe storage and sharing of personal data. **See requirement 2.**

Requirements

1. By 5 October 2021, staff must improve the security of the premises. The provider must:

- a) ensure entry and exit points are safe and secure
- b) ensure staff carry out effective risk assessments, so that they are aware of potentially unsafe situations.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I my environment is safe and secure.' (HSCS 5.17).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(SSI 2011/10) Regulation 4 (1)(a)(b) Welfare of Users.

2. By 1 November 2021, the manager must improve how they manage personal data to ensure it is done safely and respects the privacy of children and families. The provider must:

- a) ensure all information shared improperly with third parties is destroyed in line with General Data Protection Regulations
- b) ensure staff take part in relevant training for the storage and sharing of personal data.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I am fully informed about what information is shared with others about me.' (HSCS 2.14).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(SSI 2011/10) Regulation 4, Welfare of Users (1)(b) respect the privacy and dignity of service users.

How good is our leadership?

3.1 Quality assurance and improvement are led well

We found that there were no quality assurance systems in place. For example, the manager had not effectively evaluated staff practice to identify areas for development and raise standards. This resulted in inconsistencies in children's care and areas for improvement not being fully identified. We signposted the manager to our Hub for bitesize sessions and guidance, such as 'A quality framework for day care of

children, childminding and school aged childcare', to support the implementation of robust quality assurance. **See requirement 1.**

Children, families', and staff views were sought to explore what they felt was going well in the service. We found these reflections did not influence positive change to outcomes for children and families. The manager should ensure children and families play a key role in the service, including influencing change. Staff should act on feedback shared to promote inclusion and respect. The manager told us that they planned to improve children's inclusion in the service's improvement journey through the use of mind maps. **See requirement 1.**

The service's improvement plan required further development. The management team had identified general areas for improvement, however it was unclear what actions were to be taken and the timescales for reviewing the impact of any changes made. This resulted in staff having a limited focus on improvement goals and no understanding of the impact changes had on children's outcomes. The manager agreed to improve this to ensure everyone works together in a genuine spirit of partnership.

Requirements

1. By 1 November 2021, the manager must ensure improvements are made that have a positive impact on the outcomes for children, this includes developing an effective and robust quality assurance process. The provider must:

- a) put clear and effective plans in place for maintaining and improving the service that reflect the needs of children and families using it
- b) undertake effective monitoring and auditing to ensure areas for development are identified and addressed promptly.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/10) Regulation 4 (1)(a)(b) Welfare of Users.

How good is our staff team?

4.1 Childminder skills, knowledge, and values

Most staff were seen to work together and were aware of their responsibilities for that day, such as collecting children from school and leading snack duty. At times, we found that staff interactions lacked compassion and warmth. This included responding negatively to children's verbal and non-verbal communications. For example, a child told a member of staff that they had hurt themselves and was not comforted or reassured. On another occasion, a member of staff was heard using an inappropriate tone when speaking to a child. Staff therefore failed to support children, resulting in their needs not being respected or met. The manager agreed to address these concerns immediately, by reviewing staff practice and carrying out staff supervisions to identify further action required. **See requirement 1.**

Staff undertook qualifications relevant to their role and engaged in core professional learning, such as first aid. We found that children would benefit from staff developing their knowledge and understanding of good

practice, to improve play and learning experiences. The manager had not effectively monitored staff practice to ensure children received a high quality of care, resulting in poor outcomes for children. Feedback given to staff during supervisions did not always encourage staff to reflect on their practice and identify learning needs that would improve children's outcomes. The manager agreed to develop robust supervisions that identified meaningful development plans for staff. This would benefit children as staff would be trained, skilled and competent. **See requirement 1.**

Children were put at risk due to inconsistencies in the service's recruitment procedures, such as the validity of references. We signposted the manager to recruitment guidance to improve their understanding. The service's induction processes for new staff were limited to a one-off event, focusing on policies and procedures with little consideration of the care, play and learning needs of children. The manager has an awareness of the national induction guidance, we suggested using this guidance to improve their induction procedures to promote ongoing learning and development for staff.

Requirements

1. By 30 December 2021, to ensure children receive high quality care and experiences, the manager should improve staff practice. Improvements could include:

- a) Each staff member's training needs should be assessed and appropriate training and development opportunities provided
- b) Staff should be effectively supported to implement their learning from training and development opportunities, to improve practice and outcomes for children
- c) Staff should receive a robust induction process that takes account of varying levels of knowledge and understanding
- d) Effective systems should be put in place to assess the impact of training, development and induction processes.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on practice and follow their professional and organisational codes.' (HSCS 3.14).

This is also to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (Scottish Statutory Instruments 2011/210) Regulation 15 Staffing (b) ensure that persons employed in the provision of the care service receive (i) training appropriate to the work they are to perform.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

When requiring medication, children should receive treatment in a safe and effective way. The provider must improve their procedures of care and support to ensure everyone is aware of children's needs, and how to respond in the event of an emergency. This should be in place by the 30 December 2020.

This is to ensure the quality of the care and support is consistent with the Health and Social Care Standards, which state that my care and support is provided in a planned and safe way, including if there is an emergency or unexpected event (HSCS 4.14).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for a Care Service) Regulations, Scottish Statutory Instruments 2011, 210 Regulation 4 Welfare of Users - (1) a provider must (a) make proper provisions for the health, welfare and safety of service users.

This requirement was made on 4 December 2020.

Action taken on previous requirement

We found that medication paperwork was in place. Staff were aware of the medical needs of children. We suggested improvements to the recording of medication, as detailed with this report.

Met - within timescales

Requirement 2

Children should experience a high quality of care and support that protects, respects and empowers them. The manager should improve systems for auditing and reviewing paperwork to ensure the service is well managed. This requirement should be met by 30 December 2020.

This is in line with the Health and Social Care Standards that state, I use a service and organisation that are well led and managed. (HSCS 4.23).

This is in order to comply with The Public Services Reform (Scotland) Act 2010, section 53 Inspections (6) SCSWIS may at any time require a person providing any social service to supply it with any information relating to the service which it considers necessary.

This requirement was made on 4 December 2020.

Action taken on previous requirement

No quality assurance processes were in place. This has been reflected within this report and a further requirement has been made with the 'How good is our leadership' section of this report.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

Children's feedback should be used to shape improvement within the service. Staff should reflect on their improvement plan to measure the impact of any changes made.

This is in line with the Health and Social Care Standards that state, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes. (HSCS 4.19).

This area for improvement was made on 4 December 2020.

Action taken since then

We found that children's views were sought but not always acted upon. Therefore, this recommendation has not been met. This has been reflected further in the report. A requirement has been made within the 'How good is our leadership' section of this report.

Previous area for improvement 2

Children should experience care from competent, skilled staff. The provider should improve the way staff's professional development is identified and reviewed to ensure it has a positive impact on children using the service.

This is in line with the Health and Social Care Standards that state, I experience high quality care and support based on relevant evidence, guidance and best practice. (HSCS 4.11).

This area for improvement was made on 4 December 2020.

Action taken since then

We found that staff interaction did not follow good practice guidance. This has been reflected in the report. This recommendation has not been made. A requirement has been made with the 'How good is our staff team' section of this report.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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