

Ladybird Family Nurture Centre Day Care of Children

Stuart Road
Glenrothes
KY7 4HT

Telephone: 01592 583 477

Type of inspection:
Unannounced

Completed on:
31 January 2024

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2003017098

About the service

Ladybird Family Nurture Centre is located close to the town centre of Glenrothes, within a residential area. It is close to local amenities such as shops, transport links and primary schools. The service is registered to provide care to a maximum of 80 children at any one time, aged between 18 months and to an age attending primary school.

Children are cared for across four playrooms. Two rooms are for early entrants for children from 18 months. The other two rooms are for children aged around three to an age not yet attending primary school. Each room has direct access to toilets and both early entrants' rooms have nappy changing facilities close by. There is also a family room, a lunch space, a nurture space, a library and another breakout space for children to use with the support of staff. There is a large outdoor play space to the rear which is directly accessible from the playrooms.

About the inspection

This was an unannounced inspection which took place on Tuesday 30 and Wednesday 31 January 2024. Feedback was provided to the headteacher, deputy head of centre and principal teacher on Wednesday 31 January 2024. We reviewed further evidence following these visits and provided additional feedback to the headteacher on Tuesday 20 February 2024 which concluded the inspection. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spent time with 63 children
- received feedback from eleven of their family members
- spoke with ten staff and management
- observed practice and daily life
- reviewed documents
- spoke with relevant professionals.

Key messages

- As a priority, staff must be supported to use best practice to offer children a nurturing, trauma informed approach at all times. This is to promote children's emotional wellbeing and ensure high quality care, play and learning.
- Children's personal plans must provide detailed information about identified strategies that ensure children experience the right support at the right time. This should include the views of the child and be shared with families.
- Staff should work closely with relevant professionals to identify and implement strategies which consistently promote positive outcomes for children, including for children who need some additional support to achieve their potential.
- Children enjoyed some fun, creative and imaginative play experiences that helped them to develop skills for life.
- Children and families felt included because they enjoyed home visits and a family support programme that supported their holistic needs.
- Children and families had been consulted on some changes which had been made to improve children's experiences.
- Leaders must ensure that relevant policies and procedures are implemented promptly following any significant accidents and incidents to consistently promote positive outcomes for children.
- Staffing arrangements must be planned to meet children's individual needs, ensuring they are well supported at all times.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	2 - Weak
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

2 - Weak

We made an evaluation of **weak** for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

Quality indicator 1.1: Nurturing care and support

Children were mostly well supported through their daily experiences. Staff arranged home visits with families to build trusting relationships with them. The home visit was well timed to help children and families with meeting new adults and with settling into nursery. As a result, children often felt safe and secure soon after they started nursery. For example, one child who was settling in, happily explored the play space, painting at the easel and playing on the slide. Some families were able to spend time in nursery before their child started as part of the Family Learning Programme. They were offered a choice of supportive family orientated experiences, such as Bookbug sessions, before and throughout their time with the nursery. These opportunities helped them to feel included while promoting positive outcomes for the family as a whole.

Families told us they were happy with the quality of care and support their children experienced. One parent told us, "Ladybird Nursery provides a fantastic service which helps my child to thrive." Most children had a positive experience at nursery. Young children were well cared for by staff who understood how each child communicated their needs and who responded sensitively. When children had their nappy changed, staff sang nursery rhymes and made this a comfortable and respectful experience. Staff responded well to most older children and respected their choices. Most staff got down to children's level to speak with them and ask them questions.

Some children were not yet settled in the nursery and became distressed at times. All children had personal plans in place and, for some, this detailed how staff should help them to feel safe and secure. These plans did not consistently consider children's important past experiences and what particular support they needed to feel secure and happy. Although staff and leaders were trauma aware, this was not yet having a positive impact for all children. On three occasions during our visit, we observed staff using physical intervention to support children. We were concerned that this practice had not been agreed as part of a multi-agency plan, was not in line with best practice guidance and was not respectful of children's rights. We raised our concerns immediately with the managers and have made a requirement for the service to improve. **See requirement one.**

Some children were supported by other professionals including social workers and educational psychologists, to help them achieve their potential. Some staff told us that they would like further training and development to meet children's additional support needs. Staff had worked alongside some professionals to support children's wellbeing and had used general advice to identify strategies in individual personal plans. The strategies identified did not always meet children's needs and were not put in place quickly enough to consistently promote positive outcomes. Children's personal plans should be reviewed and implemented in a timely manner so staff can respond promptly and sensitively to changes in children's lives. This should be done with the support of relevant professionals to identify individual strategies which are specific to children's needs and experiences. **See requirement two.**

Children enjoyed spending time with friends and staff during mealtimes. They were encouraged to be independent, choosing what they wanted to eat and serving themselves from a small range of options.

Older children were able to choose when they had lunch across the middle of the day, which provided a relaxed routine. Food choices were mostly nutritious and staff spoke to children about healthy foods. Some children were supported to wipe their faces and wash their hands after meals, while a few children returned to play without going through this routine. This included some children who had spillages on their clothing. We asked staff to carefully consider how to support children's personal care routines such as wiping noses and changing clothing when this is needed. This would fully respect children's dignity and promote their confidence and self-esteem. **See area for improvement one.**

Quality indicator 1.3: Play and learning

Most children enjoyed their play, including planned activities such as group singing and literacy games, as well as more spontaneous play outdoors. Children told us they liked the toys they played with and one child told us they liked nursery because they got to play with their best friend. Children had opportunities to be creative, curious and imaginative in fun ways. Where staff planned play experiences, these promoted group work and helped some children develop life skills. Families also said their children enjoyed playing at nursery. One parent said, "My son's latest interests are integrated into his play and (he is) learning well." Staff promoted children's literacy and numeracy skills through play, providing resources that helped them to enjoy singing rhymes, reading books and counting in games. A few children lost interest in their play throughout the day and there were times when the noise in the rooms for older children was quite loud. We encouraged staff to consider how they can offer all children play that is meaningful and interesting to promote a calm and purposeful experience for everyone.

Staff had recently been reviewing and developing how they planned children's play and learning. Staff were developing their understanding of children's interests and needs to plan play that would help them to achieve their potential. Some staff were developing knowledge and understanding of child development and we encouraged them to critically reflect on their approach using best practice, theory and research. For example, staff should carefully consider how developmental milestones are used so that they consistently respect each child's unique experience. This will take into account their individual rights, needs and choices. Children would also benefit from play and learning that supports their emotional resilience and helps them to develop independence in resolving conflict in a safe and secure environment.

Requirements

1. By 1 June 2024, the provider must ensure children's health, safety and wellbeing is protected through managers and staff understanding their role and responsibilities in delivering rights based care for all children, including those with additional support needs.

To do this, the provider must, at a minimum:

- a) deliver staff training on trauma informed practice and de-escalation strategies
- b) provide ongoing learning opportunities for staff on delivering rights based care based on nurturing practice.

This is to comply with Regulations 4(1)(a-c) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that “Any treatment or intervention that I experience is safe and effective” (HSCS 1.24) and “I am supported to be emotionally resilient, have a strong sense of my own identity and wellbeing, and address any experiences of trauma or neglect” (HSCS 1.29).

2. By 1 June 2024, the provider must ensure children are fully included and supported to achieve their potential by staff reviewing and implementing children’s personal plans with clear, detailed information on any identified strategies in a timely manner.

This should include, but is not limited to:

- a) develop and implement personal plans for children which detail their rights, needs and choices
- b) identify and implement strategies for children using advice from relevant professionals to meet children’s individual needs, where necessary.

This is to comply with Regulation 5 (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that “My care and support meets my needs and is right for me” (HSCS 1.19) and “My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected” (HSCS 1.23).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, ‘Guide for providers on personal planning: Early learning and childcare.’

Areas for improvement

1. To promote children’s holistic wellbeing and to reduce the risk of the spread of infection, the provider should ensure staff respond sensitively and appropriately to meet children’s personal care needs in their daily routines.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that “I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services” (HSCS 1.28) and “I am empowered and enabled to be as independent and as in control of my life as I want and can be” (HSCS 2.2).

How good is our setting?

4 - Good

We evaluated this key question as **good** where there were important strengths which, taken together, clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

Children played with a good range of resources that encouraged them to be curious, creative and imaginative. They could choose between indoor and outdoor play freely and were encouraged to be independent when putting on coats, jackets and wellies. Each room had defined play spaces, for example room to play with blocks, a home corner and spaces to be creative with paint, water and sand. Some resources had been collected into bags and boxes for individual children to support their needs and offer play that met their interests. Young children had a good balance between cosy and comfortable spaces to rest and relax and opportunities for more active play.

As a result, children were encouraged to have fun in their play and learning. Some resources and furniture were worn, tired or in need of repair. Staff and leaders were aware of this and used their allocated budget to improve children's resources over time. We agreed that this would continue to improve children's experiences and offer them high quality play and learning.

The premises was mostly well maintained and staff reported issues with equipment quickly. Leaders had plans in place to make improvements to the building this year. For example, ventilation was being added into one of the nappy changing areas and a more secure entrance was being put into one of the rooms. Once completed, children's health, safety and wellbeing will be further protected. Some important equipment was broken and there had been a delay in the provider arranging the repair. For example, an urgent request to fix a door handle was outstanding after 21 days. We encouraged the service to continue raising their concerns with the provider to ensure children played in a safe and well-maintained setting.

Children were involved in assessing risk themselves, using a checklist to check the outdoor space with a member of staff before they played there. Staff had recently used best practice guidance on keeping children safe to reflect on their practice and identify where they could make changes to the environment. This included understanding the benefits for children in taking measured and appropriate risk in play. There were systems to regularly check all children were present and to maintain the toilet spaces so children were protected from slips, trips and falls. We discussed how risk assessments could be used in other situations to support children's health, safety and wellbeing, including to meet their individual needs.

Children played in a mainly clean setting because staff implemented measures to reduce the risk of the spread of infection. Toilet and nappy changing spaces had been replaced in recent years with wipeable surfaces that made them easy to clean and maintain. Staff worked together to clean throughout the day and children were encouraged to help, taking responsibility for mopping floors and tidying things away. There were times when children's handwashing could have been better, for example, after mealtimes. In addition, we encouraged staff to ensure tables were cleaned between children sitting at mealtimes. We understand that this may include discussions with other departments achieve this. This will further reduce the risk of the spread of infection and keep children healthy.

How good is our leadership?

3 - Adequate

We made an evaluation of **adequate** for this key question, where strengths only just outweighed weaknesses.

Quality indicator 3.1: Quality assurance and improvement are led well

Children and families had been consulted on their views and opinions of the service. For example, families had been asked what they wanted children to achieve from their Forest Kindergarten experiences. Children had also been involved in making decisions when the playrooms for older children were split, including what they wanted to play with and who they wanted to be in their new room. This helped children to feel that they were part of the changes being made. In addition, this change had been planned based on a review of accidents and incidents and staff had used best practice guidance to evaluate children's experiences. As a result of this work, the number of accidents and incidents had reduced which had helped to keep more children safe.

Staff met regularly to discuss their practice, in smaller room groups and as a whole team. They used best practice guidance and relevant quality frameworks to evaluate their work and consider how this promoted positive outcomes for children.

As a result, some of the areas identified for improvement in this inspection had been planned for and were in progress. For example, staff and leaders were developing a clear statement on the different levels of support they planned to offer children so this was easy to communicate with families. It was hoped this would help staff make informed decisions to support children to achieve their potential. There was a quality assurance calendar in place which helped staff and leaders to see priorities quickly alongside their improvement plan. This work had improved some aspects of children's care, play and learning experiences over time.

Children had experienced a significant amount of change in both the staff and leaders who cared for them in recent months. Although we recognised that leaders had been working hard to maintain the quality of children's experiences, we discussed and acknowledged the impact of significant change in the leadership team. This meant the day to day challenges of managing two services had been difficult. The provider should consider what further support the leadership team and staff may need to consistently promote positive outcomes for children and families. **See area for improvement one.**

During our inspection, we reviewed evidence relating to one incident of physical intervention. We considered what had led to the incident occurring, and the actions taken by the service following this. While local authority policies and procedures were followed, leaders needed to be prompted to implement these. In addition, relevant professionals and agencies were not informed of the incident so that they could support a review and learning. Leaders and staff should revisit their roles and responsibilities following incidents where children's rights, needs and choices are compromised to consistently promote positive outcomes. **See requirement one.**

Requirements

1. By 1 June 2024, the provider must ensure children's health, safety and wellbeing is well protected through effective and robust procedures when dealing with significant accidents and incidents.

To do this, the provider must, at a minimum:

- a) ensure staff implement relevant policies and procedures in a timely manner following accidents and incidents
- b) ensure leaders notify relevant agencies and professionals about significant events relating to children's health, safety and wellbeing
- c) ensure information shared with families about accidents and incidents is clear, accurate and accessible
- d) ensure reviews of accidents and incidents support staff to identify any improvements required to promote positive outcomes for children
- e) ensure identified improvements are implemented, monitored and evaluated in a timely manner to improve children's experiences.

This is to comply with Regulation 3 (Principles) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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) and "I am listened to and taken seriously if I have a concern about the protection and safety of myself or others, with appropriate assessments and referrals made" (HSCS 3.22).

Areas for improvement

1. To offer all children high quality care, play and learning experiences that promote positive outcomes, the provider should ensure leaders regularly observe, review and evaluate staff interactions and practice with children. This should include, but is not limited to, monitoring staff practice to ensure identified strategies for children are implemented appropriately.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "I use a service and organisation that are well led and managed" (HSCS 4.23).

How good is our staff team?

3 - Adequate

We found that improvements needed to be made by building on strengths to consistently promote positive outcomes for children. Therefore, we evaluated this key question as **adequate**.

Quality indicator 4.3: Staff deployment

Some children had built positive relationships with staff. One child told us, "(Staff member) is my teacher and she looks after us." Families were also happy that the team worked well together to support their children. Some parents commented that, "they team together to help the kids grow in confidence", "the staff are amazing" and "(staff are) always supportive and helpful." For example, one staff member said, "we support each other and look after each other very well." A few staff recognised that recent changes had impacted on their wellbeing. We also found that there could be better communication between staff and leaders so they felt included and respected. We encouraged leaders to consider how they can support staff wellbeing so children experience a consistently positive environment where people work together well.

There had been some instability in staffing arrangements due to absences and movement of staff into other jobs. Leaders recognised that this had impacted on how much they could drive improvement across the team. In addition, there were times when children's consistency and continuity of care was compromised because there had been frequent changes in those who cared for them. Staff were working hard to maintain a positive experience for children and some stability in staffing was returning. The recent changes impacted most on children who had additional support needs. Staff in early entrants worked well together with the right number of staff to meet the needs of the children in their care, including additional support staff who supported particular children to remain safe, healthy and achieving. This level of support was not consistent for older children so that their individual's rights, needs and choices were fully met. The provider and leaders must review staffing arrangements so that all children are supported to achieve their potential. **See requirement one.**

Some staff planned their routines as a team to ensure children were well supervised and had opportunities to spend quality time with staff. For example, staff working with younger children communicated well throughout the day to change plans and be flexible when children needed to sleep or have their nappy changed. This was not consistent across the nursery and staff were not yet confidently deploying themselves at key times of the day and in key play spaces. For example, staff should consider how they work as a team to ensure drop off and pick up times are safe and ensure children are accounted for at all times. We also discussed ways that staff deployment could provide some children with a better lunch experience, including adapting the timing of staff breaks so that more staff are available to support children through this important routine. Staff should also improve supervision in the outdoor space so that children playing in more hidden areas are well supported and safe. **See area for improvement one.**

Requirements

1. By 1 June 2024, the provider must ensure that children's care, play and learning needs are met at all times through effective staffing arrangements.

To do this, the provider must, at a minimum:

- a) implement staffing that meets the specific needs of all children, including those with additional support needs
- b) implement staffing that keeps children safe and accounted for at all times, including consideration for the layout of the premises
- c) implement staffing that uses any additional support staff who are available to meet children's needs
- d) ensure there is an appropriate mix of staff with the right knowledge, experience and skills to meet all children's needs.

This is to comply with Regulations 4(1) (Welfare of Users) and 15 (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that "My needs are met by the right number of people" (HSCS 3.14) and "I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm" (HSCS 3.21).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, 'Guidance on adult to child ratios in early learning and childcare settings'.

Areas for improvement

1. To ensure children are safe and accounted for at all times, the provider should deploy staff effectively so children are well supervised, especially at key times and in key spaces. This should include, but is not limited to, planning staff breaks to ensure children experience high quality care, play and learning throughout their daily routines.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "My needs are met by the right number of people" (HSCS 3.15) and "I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty" (HSCS 3.18).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate practice notes, 'Keeping children safe.'

Complaints

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

Detailed evaluations

How good is our care, play and learning?	2 - Weak
1.1 Nurturing care and support	2 - Weak
1.3 Play and learning	4 - Good
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.