

Culter School Nursery Day Care of Children

22 School Road
Peterculter
AB14 0RX

Telephone: 01224 733 197

Type of inspection:
Unannounced

Completed on:
24 January 2024

Service provided by:
Aberdeen City Council

Service provider number:
SP2003000349

Service no:
CS2003014421

About the service

Culter School Nursery is registered to provide day care of children service to a maximum of 48 children at any one, from three years to those not yet attending primary school. Minimum adult:child ratios will be: three and over - 1:8 if the children attend more than four hours per day, or 1:10 if the children attend for less than four hours per day.

The nursey is situated within Culter School on School Road, Culter. The nursery is close to local amenities and easy bus travel. The playroom provides a spacious area for children with direct access to an enclosed outdoor play space.

About the inspection

This was an unannounced inspection which took place on 23 February 2024 and 24 February 2024 between the times of 09:00 and 17.30. The inspection was carried out by two inspectors 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:

- Spoke with children and observed their experiences
- Spoke with staff and management
- Observed practice
- Received 22 online questionnaires from parents/guardians
- Received 10 online staff questionnaires
- Reviewed documents
- Spoke with visiting professionals.

Key messages

- All parents who returned our online questionnaire indicated that they were happy or very happy with the overall service provided.
- Staff provided a welcoming and comforting place to be for children, families.
- Staff should continue to evaluate and make further improvements to the lunch time routine.
- Children's personal plans should be improved to ensure children's needs were fully met.
- We found significant concerns in the recording and safe administration of medication.
- Most children had fun and were actively involved in leading their play and learning.
- Staff are regularly reviewing the layout of the new play space with early stages of success.
- Children benefitted from opportunities to play outdoors in all weathers.
- Parental engagement and feedback continues to be focused area for development with early staged of success.
- Children experienced warm, caring and nurturing approaches to support their overall wellbeing.
- Staff were committed their role to support the wellbeing of children and families in their care.

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?	3 - Adequate
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

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

How good is our care, play and learning?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact on outcomes for children, key areas need to improve.

1.1 Nurturing care and support

Staff provided a welcoming and comforting place to be for children, families and visitors. Staff demonstrated positive relationships with children and their families. Parents told us, 'The staff are amazing and so supportive, very approachable if needed.' As a result children experienced warm, caring and nurturing approaches to support their overall wellbeing. Children were comfortable with staff and were happy to approach staff for help or cuddles throughout the day.

Children were supported in their personal care routines by staff. Nappy changing was discreet and children were supported in the designated nappy changing area within the toilets.

Children were encouraged to clean their teeth each day. This promoted good dental health which was further enhanced by a visit by Childsmile. However, the organisation of toothbrushing could be improved as it took a long time to complete. Most children did not wash their hands after lunch and the supervision of handwashing throughout the day should be improved. Children were encouraged as part of lunch time routine to wash their face after meal times using a mirror and individual face cloths. This supported good hygiene habits.

Snacks and lunches were nutritious and enjoyed by most children. Children helped to prepare and set the tables for lunch, promoting opportunities for independence and learning in early maths at times such as counting the cutlery. On day one, lunch was poorly organised and a few children sat for a lengthy time with food unable to start eating until their friends were also seated. Staff hovered rather than supporting children who were seated at tables. These concerns were discussed with the manager at the end of day one and some changes were made on day two. This meant children were seated earlier and started eating sooner. Staff should continue to evaluate and make further improvements to the lunch time routine for children to ensure the best possible experience.

Children's personal plans should be improved to ensure children's needs were fully met. Personal plans were available in 'See Saw' which meant parents were aware of, and involved in recording their child's likes, dislikes and preferences. Staff supported most children well and spoke to us about the individual care and support and adaptations made for some of the children attending. However, there was not always clear strategies recorded in children's personal plans to help ensure a consistent approach. Some children would benefit from a more detailed support plan to support their progress and development. We discussed this with the manager who agreed to action this.

Opportunities for children to rest and recuperate throughout the day could be better. After lunch and later on in the afternoon, a few children looked tired and would have benefited from an opportunity to rest in an area more conducive to relaxation and quiet play.

We found significant concerns in the recording and safe administration of medication. Medical care plans did not contain clear signs and symptoms of when to administer medication, some forms had not been signed by parents when medication had been administered, information had not always been reviewed by parents

every three months, some lifesaving medication did not have a prescription label and some forms lacked clear information on the steps to be taken when administering medication or in an emergency. We discussed this with the manager and immediate action was taken to begin addressing the areas raised (**see area for improvement 1**).

1.3 Play and learning

Most children had fun and were actively involved in leading their play and learning. This was most evident in the morning where most children were engaged and interested in the activities on offer. For example, some children enjoyed making cards and pictures in the art and craft areas. They independently accessed resources and chose materials to create very individual designs. Some parents made positive comments about the play available to children, such as 'There is a wide range of learning activities for them.'

Staff interactions were positive to support children's thinking. For example, staff helped children measure chairs, encouraging children to recognise numbers and estimate length through play experiences. Some staff took time to listen to the children and made sure they were able to access materials and play where they wanted. Staff were engaging when reading stories and when singing songs during group times.

Planning approaches could be improved. Observations of children did not always identify next steps or support children's individual interests or learning needs. This meant not all children were sufficiently challenged with a range of high quality learning experiences relevant for their stage of development. Some parents told us they would like more information about what their child does each day and how they are progressing. Comments included, 'more updates on See Saw would be good because they are few and far between and don't really seem personal' and 'I would like to hear/see more about my child's day/week not just the month.' We discussed this with the manager who agreed to develop this further.

Literacy and numeracy was embedded in some play experiences. Staff discussed recent training and how they had improved opportunities for literacy development in the art and craft area. This was evident in children's engagement and in their pride of their art work. Children were encouraged to recognise their own names and some children were confident in writing and recognising letters. Tape measures were well used by the children, promoting early numeracy development.

Children benefitted from opportunities to play outdoors. The outdoor learning environment was fun and children enjoyed sliding in the mud. They enjoyed chasing bubbles and worked together to problem solve and create a chute for balls using a range of gutters and pipes.

Areas for improvement

1. To ensure children's safety the recording and administration and monitoring of medication should be in line with current guidance.

This is to ensure that the 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).

How good is our setting?

4 - Good

We evaluated this key question as good. We found several strengths that impacted positively on outcomes for children and clearly outweighed areas for improvement.

The setting had recently been refurbished to accommodate changes needed to meet the needs of the increased hours and capacity. The setting is open plan, with lots of natural day light and ventilation. There is plenty space available to children. Parent comments about the setting included, 'Wonderful spacious setting with access for outdoors too.' Staff have worked to create a welcoming space for children. Care and attention has gone into display of information and children's work showing children that they matter.

Parents were welcomed into the nursery foyer. This provided some opportunities for the sharing of information, however this could be extended further with more opportunities for parents to enter the playroom. Most parents who responded to our questionnaire indicated that they would like to access the classroom more. This was recognised by the manager and other ways such as stay and plays were in the process of being introduced.

Staff have worked together to try new places for play areas and continue to try and find the best layout to meet the play needs of children. Recently renewed areas include the house role play areas and the literacy area. The literacy area has proven to be successful in developing engagement for children in their mark making skills. Inviting children to be enthusiastic about letter making and posting.

Most children were engaged with a variety of activities such as slime, dinosaur digging, puzzles, writing, craft, building towers and music instruments. The play dough station gave children the independence to create their own dough and experiment. Some areas of play could be developed further to increase the engagement of children in their learning. For example, role play and house corner, construction play, storytelling and reading. This would help provide increased consistency of high level experiences across all areas available to children. Cosy areas, soft furnishings and decorations would further promote restful spaces for children when needed throughout the day.

The layout of access to the garden along with staff commitment to outdoor play meant that children could freely access outdoors most of the day. Children played outdoors in all weathers and were well supported in the routine of wearing appropriate all weather suits, wellies and warm clothing for the rain. Children had opportunities for physical play and development outdoors with the freedom to explore loose parts, water and a variety of play equipment. Parents told us they liked, 'The freedom the children have to go outdoors whenever they want,' and 'Lovely seeing the garden. The play materials seem to change regularly.' Street lights within the grounds has recently been fitted to further support safety and children playing outside in the dark.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact on outcomes for children, key areas need to improve.

Staff were reviewing the settings vision, values and aims. Parents had been provided opportunities for their input and staff had had meaningful discussions with children to find out their ideas. Staff had planned next steps to collate information together to complete their updated set of aims. Having an agreed set of aims and objectives will help support staff to understand the aspirations of the service.

Parental engagement had been a focused area for development. This had led to some improvements in extended opportunities for parents to be a part of the ongoing development of the service. For example, See Saw was introduced as a way of regular communication. Questionnaires were used throughout the year to seek formal feedback on areas, such as how well staff know children, how helpful is feedback to parents and how satisfied parents were with their child's experience at nursery. Responses from parents had led to more notifications on See Saw and an updated staff board which included staff photographs.

Staff had some opportunities to take part in self-evaluation work by considering a series of evaluative questions they set themselves. Staff thoughts and ideas were often recorded on a white board or floor book, however it was not always clear how these findings were then collated and carried forward to influence strong change.

Some quality assurance work had been carried out throughout the year, however this did not always lead to effective and meaningful changes to meet guidelines and best practice. A quality assurance calendar was in place that supported a proactive approach to quality assurance, however, at times the quality assurance work was not in depth enough to provide a clear picture of how the service was performing and where important improvements were needed. The provider, manager and senior staff should now ensure that quality assurance is thorough and leads to key improvements.

How good is our staff team?

4 - Good

We evaluated this key question as good. We found several strengths that impacted positively on outcomes for children and clearly outweighed areas for improvement.

The leadership team had recently recruited new staff to roles. The importance of hiring the right staff for each position was at the forefront of their decision making. The induction of new staff had been a successful area of development for the team. New staff were mentored by existing staff and often had a buddy who worked at a similar level as them. This promoted leadership at all levels and allowed staff to build confidence in their role. A formal induction process was in place and lasted for at least six months. New staff spoke well about how these approaches had supported them to become part of the team and understand policies and procedures of the setting. Families were informed of new staff joining the team through 'See Saw' notices.

The staff team had a variety of skills and experiences within early years. This was used when considering staff rotas and shifts to ensure there was sufficiently skilled staff to care for the children. Rotas and shift patterns were well planned. Staff were flexible and dedicated to their role and would cover at short notice if any unexpected absences occurred. Staff used team huddle meetings when changes of routine were needed to be introduced to allow all staff to be aware of their role and tasks. This helped provide continuity of care for the children.

Staff breaks were planned to meet the needs of the children by keeping breaks at quieter times of the day. Staff had opportunities to rest and recuperate in a comfortable and quiet staff area. This supported staff to be refreshed for their day.

Staff mostly communicated well throughout the day, however, there were busier times where more direction and leadership would have been beneficial, such as children's lunch time routine.

All parents who responded through our questionnaire agreed that staff had the appropriate skills, knowledge and experience to care for my child and support their learning. Some comments included; 'The

leads are amazing at what they do.' 'Very good staff.' 'All seem lovely and caring.' 'The whole team are very pleasant.' 'They are all very lovely and very caring for my child.' 'Staff seem happy.' 'Staff are incredibly friendly, supportive and nurturing.'

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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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?	4 - Good
4.3 Staff deployment	4 - Good

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