

Bee Curious Nursery Day Care of Children

1 St Andrew Road
Anstruther
KY10 3HA

Telephone: 01333 310 004

Type of inspection:
Unannounced

Completed on:
14 March 2024

Service provided by:
Mackie Enterprise Ltd

Service provider number:
SP2019013326

Service no:
CS2019375619

About the service

Bee Curious Nursery is registered to offer an early learning and childcare service to a maximum of 26 children up to the age of 12 years. No more than eight children may be under the age of two years and no more than six may be of school age.

The service is located in the town centre of Anstruther, Fife, close to a variety of local amenities as well as green spaces and the beach and harbour. Children have access to three open plan playrooms and an outdoor space located to the side of the nursery. There are toilets which can be accessed directly from the playroom and there is a dedicated nappy changing room within the toilet area as well. Cots are provided for some children to sleep in a separated area of the playroom.

About the inspection

This was an unannounced inspection which took place on Tuesday 12 March 2024 between 08:30 and 19:15. Feedback was given to the manager and provider on Tuesday 12 March 2024. We also offered feedback to staff on Thursday 14 March 2024. 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:

- spent time with 20 children
- received feedback from five of their family members
- spoke with 4 staff, the manager and the provider
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy, content and having fun most of the time.
- Families told us they were happy with the quality of care, play and learning their children experienced.
- Children enjoyed a calm, relaxed and unhurried mealtime experience and ate nutritious, well-presented food that was varied and healthy.
- Children were able to choose from a range of good quality resources in the nursery and often spent time in the local community, extending their play and learning.
- Staff should improve how they assess risk, so that they carefully consider children's needs when identifying measures to reduce risk and when making changes to children's experiences.
- Staff should be more responsive to children's changing needs by using effective observation and meaningful personal planning approaches.
- Staff should improve their understanding of child development, best practice and research to consistently offer high quality care, play and learning to all children.
- All children should consistently experience nurturing care and support from staff that is in line with the vision, values and aims of the service.
- Teamwork and staffing arrangements could be improved so that children experience consistency and continuity to nurture their wellbeing.

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?	3 - Adequate
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?

3 - Adequate

We evaluated this key question as **adequate**, where strengths only just outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children were happy and content most of the time. They experienced warm, caring and kind support from staff who wanted the best for them. Most children were well supported through their daily experience. This included at mealtimes where they were encouraged to be independent, choosing their own food and serving themselves. There was a calm and relaxed atmosphere at mealtimes which meant this routine was unhurried. Meals were nutritious and well-presented which helped children to build positive relationships with food. Children would benefit from staff spending more time sitting with them at mealtimes. This would improve supervision and also give staff opportunities to build close relationships with children in a genuine and meaningful way.

Children's personal care routines were well managed. Staff were kind and caring when supporting children who were toilet training and respected children's rights during nappy changing. Children were also encouraged to wipe their faces and change clothes so they were comfortable and clean. While some staff responded to children's actions, emotions and words to support their wellbeing, there were times when staff missed opportunities to fully meet children's needs. Staff did not always respond quickly and sensitively to children's verbal and non-verbal requests for support. In addition, staff did not always get down to children's level when spending time with them. This compromised their ability to provide nurturing and compassionate care and support that fully meets children's needs. Staff should ensure that they consistently offer children nurturing care and support through high quality interactions that respect children's right to be heard. **See area for improvement one.**

All children's registration information was in place which recorded their basic needs; for example, details about comforters children needed to feel safe and secure. Staff had asked families to provide information that helped them understand each child's specific needs. Some of this information was used well; for example, to respect their food preferences at mealtimes. Staff also had good relationships with relevant professionals. They shared information that helped them to identify strategies for children's personal plans. Children's personal plans were not yet in line with best practice guidance. Staff did not use them effectively to meet children's needs. The plans were not well maintained which meant there were missed opportunities to consistently promote positive outcomes. While staff responded to some significant changes in children's lives, plans were not updated frequently enough to recognise children's individual needs, preferences and choices. As a result, staff did not have a clear plan on how to meet each child's individual needs. Some parents also wanted to feel more included in personal planning so they could understand their child's individual learning journey. We asked staff to improve their understanding of the purpose and importance of effective personal planning in meeting children's needs, rights and choices. **See area for improvement two.**

Medication policies and procedures had been updated by staff since the last inspection. This was in line with best practice guidance to ensure staff knew their responsibilities in keeping children safe and healthy. Most children were receiving the right support at the right time to meet their medical needs. We found that some medication was out of date and we asked staff to ensure that this was replaced as soon as possible so that it is fully effective when children need this. This would ensure all children remain safe and healthy and receive the right medication to meet their health needs. Staff should also ensure that their medication checks are effective in recognising when medication needs to be replaced.

See area for improvement three.

Quality indicator 1.3: Play and learning

Most children enjoyed fun and exciting play that helped them to try new things and explore their own ideas. Children had opportunities to choose where they played and what they did, for most of the day. Children particularly enjoyed playing outdoors and there were some good resources available to help children be creative, imaginative and curious. Families told us that they liked the child-centred approach to play. They were able to see how this was supporting their children to learn and develop. Staff made good use of the local community to extend children's play and learning experiences, visiting the beach, local greenspaces and businesses. The nursery had good connections with the local community which helped children to feel included and respected. There were opportunities for play and learning for infants and toddlers to be improved so this met their unique needs and choices. These play experiences should encourage warm, sensitive and responsive interactions where fun and exciting play offers interwoven care and learning.

Staff were at the early stages of planning high quality play, learning and development opportunities. Children's interests influenced the play they experienced and staff were beginning to use what they saw and heard in play to inform their plans. All staff respected children's right to play and understood the value of play in promoting positive outcomes. There were times when children's play and learning was not challenging enough to help them achieve their potential. Whilst some children were making good progress, there were missed opportunities to build on children's interests in meaningful ways. There was also room to improve how staff supported children's emotional resilience through nurturing approaches that promoted positive wellbeing. Staff should now increase their understanding of child development so they can skilfully support high quality play and learning opportunities. **See area for improvement four.**

Areas for improvement

1. To ensure all children are nurtured and supported throughout their daily experience, the provider should ensure staff interactions are consistently nurturing and compassionate. This should include, but is not limited to, responding quickly and sensitively to children's actions, emotions and words so their needs are met as they change.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "I experience warmth, kindness and compassion in how I am supported and cared for, including physical comfort when appropriate for me and the person supporting and caring for me" (HSCS 3.9).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, 'Growing my potential: Promoting safe, responsive, nurturing care and learning experiences and environments for babies and young children' and the Scottish Government document, 'Voice of the Infant: best practice guidance and the Infant Pledge.'

2. To fully meet children's needs, rights and choices, the provider should develop personal plans that support staff to implement individualised, nurturing care and support. This should include, but is not limited to, promoting consistency and continuity of support for children and identifying how staff will support children's specific needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "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.'

3. To ensure children receive the right support at the right time, the provider should ensure medication policies and procedures are implemented in line with best practice guidance. This should include, but is not limited to, replacing out of date medication and carrying out regular checks of all medication held on the premises.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

This is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, 'Management of medication in daycare of children and childminding services.'

4. To ensure children achieve their potential, the provider should ensure staff improve how they plan for children's play and learning and increase their understanding of child development. This should include, but is not limited to, using high quality observations to plan play and interacting skilfully to promote children's learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "As a child, I can direct my own play and activities in the way I choose, 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?

3 - Adequate

We found key areas of performance that needed to improve alongside some strengths that had a positive impact on children's outcomes. Therefore, we evaluated this key question as **adequate**.

Quality indicator 2.2: Children experience high quality facilities

Children played in a comfortable and homely setting. Staff had developed play and learning spaces that were mostly welcoming and inviting. This included a good range of interesting, natural resources that promoted children's curiosity and creativity. Children particularly enjoyed using loose parts and open-ended resources to make new things and explore new ideas. The outdoor space was being developed and children loved being outdoors, growing plants and being active. The provider had invested in ensuring children played with quality resources and had made some amendments to the premises to improve children's experiences. There were some limitations to the changes that could be made due to the lease agreement in place. However, staff made the best of the space available to offer most children a good range of play experiences. Staff should now consider how to create an interesting, responsive and nurturing environment for infants and toddlers. This will ensure they are consistently offered high quality care, play and learning.

Children were encouraged to wash their hands at appropriate times throughout the day. Staff kept the premises clean and there were good measures in place to reduce the risk of the spread of infection. The provider was working with the leaseholder to ensure key areas of the premises were well-maintained. For example, flooring had been replaced and renewed to ensure this reduced the risk of slips, trips and falls. We found that the nappy changing facilities could be improved to offer a safer and more pleasant experience for children.

For example, the nappy changing unit was not suitable for older children and there were some surfaces that increased the risk of the spread of infection. The provider was keen to make the necessary improvements and was liaising with the leaseholder to achieve this. We encouraged them to continue these discussions so that children's nappy changing routines are of a high quality.

Leaders had developed risk assessments that included children's ideas. This helped children understand how to keep themselves safe. Staff showed some awareness of how to reduce risk for children. Children were encouraged to think carefully when they enjoyed risky play, helping them to develop skills for life. There were times when staff did not recognise the risk everyday items could pose to children's safety. Staff should develop their understanding and confidence in providing play that is challenging and fun, while keeping children safe and healthy. **See area for improvement one.**

We also asked the provider to seek advice following recent changes to their fire risk assessment and procedures. This included access to the garden which had changed since the service was registered, at the request of the leaseholder. Once discussed with relevant professionals, staff should revisit the risk assessment and ensure measures are in place to keep children safe in the event of a fire or other emergency.

Areas for improvement

1. To keep children safe and healthy, the provider should ensure staff consistently promote a safe environment through effective risk assessment. This should include, but is not limited to, providing a setting that reflects children's stage of development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "The premises have been adapted, equipped and furnished to meet my needs and wishes" (HSCS 5.16).

How good is our leadership?

3 - Adequate

We made an evaluation of **adequate** for this key question where improvements need to be made, by building on existing strengths, to consistently promote positive outcomes for children.

Quality indicator 3.1: Quality assurance and improvement are led well

Children and families were asked for their views and opinions in several ways. There was a well maintained social media page which was only available to families. This kept families updated on what children were experiencing, as well as sharing relevant information to build family resilience. Families were able to offer feedback through this and by email, if this is what they preferred. They told us that they felt included and respected and were confident the service was well led and managed. Children and families had been able to influence the menu for snacks and lunches. They had also been asked to give general feedback on how happy they were with their experiences. Families were beginning to spend time in the service through 'stay and play' sessions. We encouraged staff to continue finding ways to bring families into the service so they can share children's experiences and build strong relationships that help to meet children's needs.

Leaders had a clear vision for what they wanted children to experience in their care, play and learning. The values they aimed to achieve were based on what children need to thrive and flourish.

The vision and values were not yet fully understood by staff and there were opportunities for staff to embed these more consistently in children's experiences. For example, children's experiences could be more individualised to respect their unique needs, rights and choices. We asked staff and leaders to consistently promote the vision, values and aims of the service in children's daily experiences. **See area for improvement one.**

The manager was developing systems for quality assurance and self-evaluation that included children, families and staff. They had worked with other professionals to understand what was expected to achieve good quality improvement. The current systems were beginning to help leaders identify what they did well and what they could do better. Our discussions highlighted that several of the areas we identified for improvement had been recognised. Plans were not yet in place to support these improvements and we asked leaders to carefully consider how they will bring about positive change. This would ensure children benefit from a culture of continuous improvement that can be sustained in the future.

Areas for improvement

1. To ensure children experience a consistently high quality experience, the provider should ensure staff use the vision, values and aims of the service to meet children's needs. This should include, but is not limited to, ensuring staff feel confident to initiate well-informed change and share responsibility for the process.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

How good is our staff team?

3 - Adequate

We found key areas of performance that needed to improve alongside some strengths that had a positive impact on children's outcomes. Therefore, we evaluated this key question as **adequate**.

Quality indicator 4.3: Staff deployment

Staff were committed to the children and families they cared for. They had shown loyalty to the provider which meant that there had been some stability for children and families. As a result, there were some good relationships between staff, children and families that helped to promote positive outcomes. Staff were given some additional time to complete personal plans and have discussions with families. The provider recognised that recruiting staff had been challenging and was keen to employ more staff so they could continue to improve children's experiences. There had also been some gaps due to staff absence which had impacted on the consistency and continuity of children's routines. We encouraged the provider to review the current staffing arrangements so that there was a balance of skills and experience that promoted positive outcomes for children and families.

While the number of staff met the expected ratios to support children, there were times when more staff were needed to meet children's needs and respect their rights and choices. For example, in the morning, children's play and learning opportunities were limited because staff could not respond to their interests. Some children's experiences were not of a high quality at the start of the day and did not fully respect their unique needs. We discussed with the provider that levels of staffing should be planned to meet children's needs. This would ensure children are safe, healthy and achieving. **See area for improvement one.**

Staff were developing as a team. There had been attempts to give staff roles and responsibilities to ensure key tasks were completed and help everyone understand what they needed to achieve. This was in the early stages and staff were still developing ways to communicate effectively with each other during the day. Staff did not always communicate well enough to ensure children experienced consistency and continuity in their routines. This meant they did not fully nurture children's wellbeing. In addition, there were times when children were not well supervised and this increased the risk of children having accidents. Staff should deploy themselves to ensure children are safe and experience consistency and continuity in their care, play and learning. **See area for improvement two.**

Areas for improvement

1. To keep children safe, healthy and achieving, the provider should ensure staffing arrangements consistently meet children's care, play and learning needs. This should include, but is not limited to, providing enough staff at all times, taking into consideration children's individual learning and support needs.

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).

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.'

2. To promote consistency and continuity of care for all children, the provider should deploy staff effectively so children are safe and nurtured through their daily experience. This should include, but is not limited to, improving staff communication to identify gaps and reduce the number of transitions that interrupt children's routines.

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 is consistent and stable because people work together well" (HSCS 3.19).

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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

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

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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