

Gingerbread - Lorne Day Care of Children

Lorne After School Club
Lorne Street Primary School
Lorne Street
Edinburgh
EH6 8QS

Telephone: +441314781391

Type of inspection:
Unannounced

Completed on:
12 March 2024

Service provided by:
Gingerbread Edinburgh and Lothian
Project Limited

Service provider number:
SP2003002804

Service no:
CS2003011995

About the service

Gingerbread @ Lorne is registered to provide a day care of children service to a maximum of 41 children of primary school age. The service is part of the Gingerbread group that offer out of school and holiday care throughout Edinburgh.

The manager is also the manager at Gingerbread @ St Cuthbert's.

The service is delivered from Lorne primary school which is in the Leith area of Edinburgh. It is located near to shops and amenities and has good transport links. The service has the use of the school dining room, toilets, the school gym hall and outdoor play spaces within the school grounds.

About the inspection

This was an unannounced follow up inspection which took place on Wednesday 6 March between 14:30 and 18:00. We returned to complete the inspection on Friday 8 March 2024 between 14:00 and 16:15. The inspection was carried out by one inspector from the Care Inspectorate. A team manager from the Care Inspectorate was present on the first day of inspection undertaking quality assurance.

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 and spoke with children using the service
- considered feedback from 6 families through an online form and spoke with three families in the service
- spoke with staff and management
- observed practice and daily life
- reviewed documents relating to the care of children and the management of the service.

We returned to give feedback to the operations manager on Tuesday 12 March 2024.

Key messages

The service met one requirement. Three requirements remained unmet.

Necessary improvements were still needed in the recording and monitoring of children's personal plans and health and medical needs to ensure children's needs were met and understood.

Quality assurance processes, including self-evaluation remained limited in impact. This resulted in missed opportunities to fully assess and understand where improvements should be made to improve outcomes for children.

One area for improvement was met. Five areas for improvement remained unmet.

Further improvements were needed to ensure children's play and routines of the day were child-led to ensure children were engaged and having fun.

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

Requirements

Requirement 1

By 1 December 2023, the provider must ensure that children's health, welfare and safety needs are met. Sufficient information must be gathered and recorded about all children's allergy and asthma needs. This will ensure staff plan and understand children's care based on up to date and reliable information.

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

- a) have a plan for each child detailing identified allergy and asthma needs, and how staff should support each child in a stepped approach
- b) ensure the detailed plan is stored with the medication for accessibility
- c) ensure the plan reflects medical instructions from the child's GP
- d) obtain a full and accurate medical history for these children from their parents, using translation services if required.

This is to comply with Regulation 4(1)(a) and (d) (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:

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This requirement was made on 30 November 2023.

Action taken on previous requirement

The service had taken action to introduce new paperwork with prompts to guide staff and made changes to meet the requirements of the serious concern letter issued after the last inspection. For example, essential information on most children's health needs had been collected, required medication was on site, and guidance on administering medication had been sought and recorded.

However, this had not been sustained over time. The service must take action to ensure that every child who has a health need has a plan to keep them safe and well, and that this is maintained and reviewed within recommended timescales.

- a) During this inspection we found missing health and medical plans for one child in the service. This meant staff were unaware of their health needs, and how to treat them and keep them well.
- b) Back up emergency medication required for one child was not on site. This meant we could not assess this part of the requirement in full. More significantly, this meant the service may not be able to appropriately meet the health needs of children when required.
- c) Plans that had been completed had appropriate information recorded. However, due to some children not having a health plan we could not completely assess this as being met.
- d) Again, those plans that had been completed with families met this part of the requirement. However, due to some children not having a health plan we could not assess this as being met.

This requirement has been restated with a date of 31 May 2024.

Not met

Requirement 2

By 31 January 2024 the provider must ensure that each child has an effective and complete personal plan which is reflective of their interests, needs, wishes and any strategies to support them. This will ensure there is a collaborative approach between the provider and families and that staff plan and understand children's care based on up to date and reliable information.

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

- a) have a full plan for each child which identifies their wishes, preferences and any needs are clearly documented
- b) ensure children who require additional support have clear strategies that are monitored, reviewed and adapted as required
- c) ensure these are reviewed with families and the child in line with legislation timescales
- d) ensure language used, and questions asked, support a values and strengths based approach to supporting any additional needs.

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 care and support is consistent with the Health and Social Care Standards (HSCS)

which state:

'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15)

This requirement was made on 30 November 2023.

Action taken on previous requirement

The service had changed the format for personal plans and reflected on the language used to support a values and strengths-based approach for all children. However, plans were not yet having an impact on the planning for, and monitoring of children's outcomes. In addition, we found that some children still did not have a personal plan. This meant there remained missed opportunities to plan for children's care and interests as well as a lack of continuity and consistency across the team to plan and provide for children's care.

- a) Not all children had a personal plan.
- b) Due to this, support strategies were missing. This meant staff were unable to plan collaboratively to put children at ease or to provide for their wishes, successes, and achievements.
- c) Some plans were being reviewed with children and families. However, this was inconsistent because not all children had a personal plan. Some parents told us they did not feel fully involved in their child's care, including developing and reviewing their personal plan. The service should investigate ways to share information on children's achievements and experiences with their families, as a number of parents told us they did not feel informed about this. This would ensure children were benefitting from a service that was right for them, and that families were involved in the process.
- d) Language used within personal plans had been changed to reflect a more strengths-based approach. This was because of a change in the format as mentioned above. However, this was not yet having an impact on children's care and support due to missing information or missing plans.

This requirement has been restated with a date of 31 May 2024.

Not met

Requirement 3

By 29 February 2024 the provider should ensure that child protection training for all staff is in place. This would ensure that leaders and staff all have a clear understanding of their roles and responsibilities. Any significant events should be recorded, stored safely and shared with any relevant professionals. This would ensure that children are safeguarded and protected from harm.

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

- a) ensure all staff are booked on effective child protection training, as well as regular refresher updates
- b) reflect on child protection scenarios to sustain impact and increase knowledge, for example, by making it a running agenda item in staff meetings
- c) record significant incidents in a structured chronology so that any pattern of information is clear and can be used to support the child
- d) share information when necessary with other agencies to ensure effective safeguarding around the child.

This is to comply with Regulation 4(1)(a) and (b) (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 care and support is consistent with the Health and Social Care Standards (HSCS) which state:

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

This requirement was made on 30 November 2023.

Action taken on previous requirement

The provider had taken action to ensure a collaborative approach to protect children from harm. We saw clear evidence to support this.

- a) Training for staff had been booked and undertaken in early March. Further training had also been sought through an external provider. The leadership team took on board recommendations for ensuring those deputising for managers also had appropriate lead training, knowledge, and skills to ensure children were kept safe from harm.
- b) Child protection scenarios had been used to reflect on in staff meetings. Future sessions were planned to allow for ongoing professional dialogue and reflection on their role in safeguarding children.
- c) Active chronologies and documents were in place where required which supported the team to keep children safe.
- d) The sharing of information and strategies of support with any agencies around the child, such as school or social work when required was understood. The service was beginning to form plans to keep children safe and well. Staff were able to discuss their roles in protecting children.

This requirement has been met.

Met - outwith timescales

Requirement 4

By 29 February 2024, the provider must ensure the health, wellbeing and safety of children at all times through having a well-led service.

To achieve this, the provider must at a minimum:

- a) have an overview of the provision through effective quality assurance processes and self-evaluation and use these to improve specifically but not limited to monitoring personal plans and medication needs and staff knowledge of them.
- b) use a range of best practice guidance for benchmarking the service against and inspiration for improvement and make this into a manageable improvement plan.
- c) provide appropriate challenge and support for staff to use personal plan information, their professional knowledge and best practice guidance to enhance outcomes for children.
- d) ensure medication records are reviewed at a minimum every three months, checking for expiry dates and reflecting any updates of symptoms and stepped approaches.
- e) ensure robust systems are in place to document and audit any accidents and incidents within the setting.

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

This is to ensure care and support is consistent with the Health and Social care Standards (HSCS) which state:

'I use a service and organisation that are well led and managed' (HSCS 4.23).

This requirement was made on 30 November 2023.

Action taken on previous requirement

The management team had created a development plan for the setting around key areas for improvement. This was not yet having an impact on outcomes for children. The service should consider how they can use this plan to achieve goals and measure them for success. The plan should continually evolve to reflect the impact of actions undertaken and ensure outstanding areas are progressed. This would ensure it was leading to improvement by monitoring it over time.

a) As stated already within this report, personal plans and medication plans were not in place for all children within the service. This meant leaders and staff did not have an effective overview of the provision as gaps remained. In addition, staff did not have all the relevant information to support all children within the service.

b) The service had not yet begun to use benchmarking to support them to improve. This meant missed opportunities remained to help reflect on the quality of the service and plan structured improvements linked to current theory and good practice. We signposted the management team to specific guidance to support them which they took on board, and plan to use moving forward.

c) Staff were not yet reflecting on personal plans to improve outcomes for children. The management team were responsive to suggestions such as allocating time in staff meetings to review personal plans which would give time to engage in professional dialogue around them. This would give staff time to increase their knowledge of individual children's needs, wishes and strategies of support and ensure consistency across the team.

d) Medication which was on site had been reviewed with families within recommended timelines. However, the service should ensure that reviews are clearly stated on the plan to ensure everyone knows when reviews are due or when they have been completed. They should also continue to quality assure procedures to ensure there are no gaps in children's health or support needs, so these can be managed and supported.

e) The service had created a system for recording and auditing accidents and incidents which was working for the service, and staff could discuss these procedures.

This requirement has been restated with a date of 30 June 2024.

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

To support children's health, wellbeing and learning opportunities, mealtime experiences should be improved. The service should ensure that drinking water is always available for children throughout the session and that staff effectively supervise mealtimes. This would ensure children are kept safe, infection prevention and control measures were being adhered to, and also provide achievement in life skills and close bonding with staff.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'I take part in daily routines, such as setting up activities and mealtimes, if this is what I want' (HSCS 2.21).

This area for improvement was made on 30 November 2023.

Action taken since then

Some improvements had been made to children's mealtime experiences. For example, drinking water and a bowl of fruit had been made available for children to help themselves to.

However, staff interaction and supervision of mealtimes was intermittent. This meant there continued to be missed opportunities to fully engage with children to get to know them and their interests, and to ensure they were kept safe whilst eating. Not all children washed their hands on arrival, and some play experiences were set up on the same table as snack which was not cleaned when snack was finished. This resulted in infection prevention and control procedures being impacted and a risk to children's health and wellbeing. We signposted the service to 'Setting the Table' (NHS Scotland, 2015) and 'Keeping children safe: supporting positive mealtime experiences in early learning and childcare (ELC)' (Care Inspectorate, 2022) to support them with benchmarking this aspect of the service. The service should continue to look for ways to involve children in mealtime experiences to provide a range of learning opportunities.

This area for improvement was not met and has been continued at this inspection.

Previous area for improvement 2

To support children to reach their full potential, the service should provide children with stimulating experiences and ensure consistency around the provision of resources that link to their interests. They should ensure that children are consulted in planning to support individualised play and learning spaces, experiences and interactions.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'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).

This area for improvement was made on 30 November 2023.

Action taken since then

Some improvements had been made to children's experiences. For example, there was more variety in arts and crafts resources, and when one child asked to do a jigsaw, staff took them to the cupboard to help them choose one. We also saw that some children had been involved in more organised group experiences through a photo book on the wall.

Overall there continued to be too few opportunities for children to have fun and be actively involved in leading their own play. On children's arrival, the key to the resource cupboard was again not on site. This meant nothing was set up ready for children to invite them into play. After it arrived, covering staff were asked to get resources out for children, but as they did not know the children well these did not reflect most children's interests. Continued support is needed to allow staff to reflect on the purpose of resources they put out for children, and to involve children effectively in planning their own experiences and play. The lack of opportunities for children to express themselves, engage in more physical activities or play with items which sparked their curiosity resulted in some children becoming bored and restless.

This area for improvement was not met and has been continued at this inspection.

Previous area for improvement 3

To enable children to feel comfortable, relaxed and valued, a homely, well-furnished and maintained environment, with areas to rest if needed, should be provided and sustained.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax' (HSCS 5.6).

This area for improvement was made on 30 November 2023.

Action taken since then

The service had provided a comfortable, soft rug in one corner of the playroom. However, children used this to engage in more physical activities, making it unavailable to use as an area for rest or relaxation. To allow for physical activities to be enjoyed, and to have areas for rest, staff should reflect on the set up of the environment to provide for both, and get children's input into their preferences. This would allow children to be able to make choices in their play and rest, and to have a broad range of experiences on offer.

This area for improvement was not met and has been continued at this inspection.

Previous area for improvement 4

To enable children to make choices about where they play and learn, improvements should be made to ensure the outdoors is consistently accessible. The service should consider how to remove barriers such as poor lighting, and provide interesting resources and play experiences which reflect children's interests. The service should also ensure that the outside gates are secure in order to keep children safe.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

This area for improvement was made on 30 March 2023.

Action taken since then

Improvements had been made in that children did go out to play on inspection, but there was a delay before it was available. This resulted in the limiting of children's experiences and their choices about where they wanted to play. Children also told us that they did not always get to go out, depending on the weather. Parents still commented that they would like more outdoor play opportunities for children.

There continued to be a lack of planning for supporting children's play and sustaining their interests for outdoor play. For example, open-ended resources or any materials which might inspire curiosity or exploration, or imaginative play were not made available to children. Staff told us again there were resources in an outdoor shed, but children had not been alerted to this so were not given this option. There were two balls out and some children enjoyed playing football. However, once again the ball was very flat and needed inflated to enhance their game fully.

A range of resources linked to children's interests and their stage of development should be provided. This would enable children to be active and happy, to make choices about what to play with and further their varying individual interests.

This area for improvement was not met and has been continued at this inspection.

Previous area for improvement 5

To promote positive outcomes for children, the management team should ensure that staff are effectively deployed at all times. They should ensure there is a mix of staff skills and knowledge which would enable newer staff members to be mentored and supported to develop their skills and confidence.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'My care and support is consistent and stable because people work together well.' (HSCS 3.19).

This area for improvement was made on 30 November 2023.

Action taken since then

Recommended ratios within the service were met, which meant children were kept safe. The management team had organised some staff development opportunities, including looking for opportunities for some staff to get qualifications in childhood practice. This would give staff increased skills and knowledge to improve outcomes for children.

However, continuity of care across the day remained variable. For example, on arrival, there was a lack of leadership and only one member of staff available who knew the children well. This resulted in covering staff not being directed or informed around aspects of provision or around the needs and interests of individual children. The management team should ensure that strong leadership exists within the service to support staff to be effectively deployed.

Further work was needed to build some staff's skills and capacity through professional development opportunities such as shadowing and reviewing of good practice to inform knowledge and skills. There should always be a mix of staff skills and knowledge available so that covering staff members can be guided and supported to ensure consistency across the day. This would also ensure that where required, core staff are continued to be supported and mentored to increase their knowledge and skills.

This area for improvement was not met and has been continued at this inspection.

Previous area for improvement 6

To improve recruitment and induction processes, the provider should ensure on application that named referees clearly document the position the person holds within the organisation they work for. Induction processes should be audited and improved to ensure they are having the required impact on staff. This would provide reassurance and confidence that all staff have the appropriate experience, skills and knowledge to support positive outcomes for children.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'I am confident that people who support and care for me have been appropriately and safely recruited (HSCS 4.24).

This area for improvement was made on 30 November 2023.

Action taken since then

Improvements had been made to application processes. Reference paperwork had been changed to prompt the person giving the reference to state the position they hold within the organisation they work for.

Induction processes were in the process of being improved. Staff were being introduced to new processes to support knowledge of procedures within the service. We signposted the service to the national induction resource, (Scottish Government, 2023) to support them further in this. The management team should continue to focus on the impact any training or process brings to the staff, and how this improves outcomes for children.

In recognition of the fact that new processes were underway, and that this is an ongoing process which takes time we assessed this area for improvement as being met.

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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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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