

Early Steps Nursery Day Care of Children

The Pyramids Business Park
Easter Inch
Bathgate
EH48 2EH

Telephone: 01506 636 394

Type of inspection:
Unannounced

Completed on:
4 April 2024

Service provided by:
Carol & Graham Armstrong a
Partnership

Service provider number:
SP2008009820

Service no:
CS2008177451

About the service

Early Steps Nursery is in Bathgate, West Lothian. They are registered to provide a care service to maximum of 63 children at any one time between the age of birth and primary seven.

The service is in a designated part of the Pyramids business park. It is close to local amenities, green spaces, schools, and nurseries and can be reached by transport links.

Children have access to four play spaces that are set up for their age group, direct access to outdoors from the playroom, personal care facilities, large outdoor garden with a cabin and space to take part in gardening activities. At times by arrangement children can use the large hall in the building when accompanied by staff.

About the inspection

This was an unannounced inspection which took place on Wednesday 3 April between 08:30 and 17:30 and continued on Thursday 4 April between 08:30 and 15:00. Feedback was given following the inspection. 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 play
- spoke with two families and received feedback from 16 online
- spoke with staff and management
- observed practice and daily life
- reviewed documents

Key messages

- Children were happy, settled and having fun as they explored the environment.
- Positive, trusting relationships had been developed that supported children's emotional security.
- Children's rights were respected across the setting through positive interactions, consultation, and respectful relationships.
- Personal plans were in place for children and families were involved in reviewing these.
- There was a strong sense of community between the setting, families and the wider community.
- Staff were happy, enjoyed their role and felt supported by the leadership team.
- Mealtime routines could be further developed to promote ownership and independence.
- The service should engage in self-evaluation to support improvements and measure the impact on outcomes for children.

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?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
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?

4 - Good

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

Quality indicator 1.1: Nurturing care and support

Children experienced warm, nurturing interactions from staff that supported their emotional wellbeing. A keyworker system was in place that meant children had a familiar adult who knew what was important to them. Visiting children in their home had been effective in building relationships that supported a smooth transition into nursery. We found all staff in rooms knew each child's individual needs and preferences and were able to respond in a caring and calm manner. Families commented "I feel at ease knowing my child is being cared for correctly and has the most fun at nursery", "The service is absolutely fantastic, feel so at ease and have formed such a strong relationship" and "The staff are all AMAZING! Feel very comfortable with all the staff and confident they are doing all they can to ensure the children are thriving." As a result, positive, trusting relationships had been formed.

Staff were able to read children's cues to meet their needs in line with families' preferences and routines. Families commented "The staff know my daughter's daily routines", "They are very caring and are always happy to help. We have continuous communication and I feel I can trust them with my children."

Some children were able to sleep and rest when they needed. Cots and mats were provided that followed safer sleeping guidance and meant children were safe as they slept. Staff had created a calm and inviting space where younger children could choose to rest and relax near the playroom. The service was developing a sensory room for children that would offer a quiet space where children could choose to be and benefit from a sense of calm through relaxation and rest.

Children were supported to understand their emotions in fun ways. For example, staff used the Colour Monster story and interactive props. We saw children use these well and talk with confidence about their emotions and the emotions of others around them. As a result, children were developing emotional literacy through play.

Children's rights were promoted through respectful interactions and consultation. Children in the out of school club were leading their play, making independent choices. Staff listened to them, encouraged them to lead their interests and responded respectfully to support play. This meant they had ownership of their club.

Interactions during personal care routines were calm and respectful of younger children's choice. Staff asked permission to help, and children were consulted on who they would like to support with personal care. As a result, children were listened to and valued as individuals.

Mealtimes for most children were relaxed, sociable and promoted independence. Children told us they get a lunch and a snack and liked banana bread. Audits had been carried out on this routine. However, we found areas that had been identified for development had not improved. We encouraged them to review this to ensure children were able to lead their routine, have opportunities to develop independence and benefit from staff having time to sit with children and engage in meaningful conversations (see area for improvement 1.)

Children's dietary requirements were well managed. The service had an effective system in place where all staff knew the needs of each child. Children and families had been involved in menu planning and taster evenings and foods reflected best practice guidance. Staff promoted an inclusive mealtime menu that ensured children enjoyed a balanced diet. Children were encouraged to stay hydrated throughout the day. Water stations were available throughout the setting. This meant that children's health and wellbeing was promoted through regular hydration.

Children's healthcare needs were met as the service had an effective and well managed system in place to ensure children received medication when needed. As a result, children's health and wellbeing was supported by a competent staff team.

Personal plans were in place for children. Most plans had been reviewed with families and children where appropriate in line with guidance. This had improved since the last inspection. We encouraged the service to now look at the organisation of this information to ensure staff are able to access important information quickly to ensure staff continue to meet children's individual needs.

The service promoted work with other agencies. They advocated for children to receive the support they needed. Staff attended meetings and were able to talk about children's progress and be involved in supporting next steps. This meant that children were supported to reach their full potential.

Quality indicator 1.3: Play and learning

Most children were leading their play and learning throughout the day. At times play was disrupted. We encouraged the service to reflect on the purpose of this and the impact that it had on children's engagement in their play and learning. We found children in the out of school provision experienced uninterrupted play. This ensured they had ownership of their routine, play and learning.

Play and learning experiences had been enhanced since the last inspection. Staff had engaged in training that focussed on what matters to children, their role in supporting developments and stages of development. We encouraged the service to continue to engage in training with a focus on understanding young children's communication and patterns of play.

The service had invested in new resources that were natural and offered children more open ended opportunities to develop their imagination, creativity and investigation. Children told us the best things about the service was they could draw, paint and complete jigsaws. We encouraged them to continue to develop rich opportunities for children through a provision that ensured core resources and experiences were always available.

The service promoted a sense of community. They worked closely with families to plan the local gala and open evenings. Children benefitted from regular opportunities to engage and learn in their wider environments. They were able to visit the woods, park, be involved in shopping and take part in visits to the local care home. This meant children were developing strong connections with their community and benefitted from engaging with nature.

Children were supported to develop skills in literacy and numeracy through everyday experiences. Books were available throughout areas and staff sat with children, read stories and sang songs. The service had worked with the Care Inspectorate improvement team with a focus on labelling the environment to ensure children were exposed to print with meaning. We encouraged them to think about ensuring all children would benefit from this and suggested adding pictures to spark communication. There were some opportunities throughout the setting to promote numeracy. We found this could be enriched through the provision. For example, self serve play dough station being available and opportunities to measure, count, estimate and create.

Planning for children's experiences were a balance of responsive and intentional promotion. Staff observed children's interests and planned activities to develop learning. Observations were shared with families through an online app. Families commented "It strikes the right balance of formal and informal learning opportunities for the children", "The service offers an overall fantastic experience" and "The staff offer learning opportunities which are age and stage appropriate for children which can be altered to suit the developmental age of each child." As a result, families felt there was a balance of indoor and outdoor activities that children enjoyed.

We found that there was a varying quality of significant observations that were not specific to individual children's interests or learning. We encouraged the service to ensure learning shared with families was specific to the child, their interests, showed progress and recorded planned next steps (see area for improvement 2.)

Some children had opportunities to document their play and learning in floor books. The out of school club used this well to share learning, record their thoughts and ideas and talk about activities they had enjoyed.

Areas for improvement

1. To ensure children experience a mealtime that is calm, unhurried, and relaxed, the provider should ensure staff promote a consistent approach that encourages children's independence, responsibility, and learning. This should include, but not limited to children having ownership of the mealtime routine and being able to enjoy the sociable experience of eating with others.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible.' (HSCS 1.35)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I take part in daily routines, such as setting up activities and mealtimes, if this is what I want. (HSCS 2.21)

2. To ensure children's learning and progress is supported, the provider should improve consistency and quality of the information recorded in journals. This should ensure observations are specific to the child, meaningful and identify relevant next steps.

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

How good is our setting?

4 - Good

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

Quality indicator 2.2: Children experience high quality facilities

Children and families benefitted from a service that was welcoming, warm and comfortable. The team had made improvements to the environment that promoted a sense of calm through natural materials and furnishings. We recognised they had made significant progress in this with rooms offering children space to have fun, explore and investigate.

Resources in the playrooms offered some challenge and risky play. We encouraged the team to further develop this to ensure there is a breadth of materials that are stimulating, exciting and promote curiosity, creativity, and sustained engagement.

Each playroom had direct access to an enclosed garden space that led off the room. This meant children were able to enjoy outdoor play and fresh air throughout the session. We could see there had been significant improvements of the opportunities offered to children in the garden area and staff had plans to develop experiences further. Children who attend the out of school club provision had access to 'The Cabin'. This was a facility within the grounds that was being developed where they were able to explore, plant and engage in risk benefit play.

Staff carried out daily checks of areas to ensure any potential risks in spaces and facilities were minimised. Staff should be mindful where drinking bottles and other items are placed to reduce the clutter in the playrooms. We encouraged them to record the actions they had taken when a risk had been identified to ensure children's safety and wellbeing.

Risk assessments for other areas within the service were displayed on the walls in each of the rooms. However, staff were not confident in the use of these. We encouraged the service to involve the team in reviewing and updating these to ensure they are familiar in how to minimise risks to children when accessing the wider provision.

Children were safely cared for in the setting. Following the last inspection, the service had introduced monitoring staff use of registers to record how many children were in their care. We recognised some progress had been made in how staff recorded children entering the setting but found these were not used consistently across all rooms. Staff were not aware of the Care Inspectorate 'SIMOA' campaign on how and why children may leave a childcare setting without an adult. This area for improvement was not met and will be looked at on the next inspection (see area for improvement 1.)

Detailed policies were in place to support the delivery of the service. They had begun to consult some families and staff on policy development. For example, the effective management of evacuating children in the event of a fire drill, nappy changing and infection, prevention, and control practice. This meant gathering the views of stakeholders was important to bring about positive change. We encouraged them to continue with this when reviewing and developing other policies as we recognised this as good practice.

Children benefitted from play spaces that had been enhanced with some new equipment. Equipment was maintained and staff were confident about procedures in place to report issues.

Effective infection, prevention and control practice was embedded in routines. Children and staff washed their hands at key times throughout the session. Staff used protective equipment when carrying out personal care, first aid and mealtime tasks and this was changed at appropriate times. This meant that children's health and wellbeing was promoted.

Areas for improvement

1. To ensure that each child is safely cared for during their time in the service, the provider should monitor staff use of daily registers to ensure that all staff know at all times how many children are in their care.

This should include, but is not limited to, being knowledgeable in the Care Inspectorate SIMOA Campaign (2021) to raise awareness of how, and why, children could leave a childcare setting without a responsible adult. Risk assessments for outings and minibus trips should be reviewed and updated with all staff being knowledgeable about potential hazards when on outings and trips away from the service.

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

How good is our leadership?

4 - Good

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

Quality indicator 3.1: Quality assurance and improvements are led well

The service promoted an ethos that was welcoming and supportive. There was a strong sense of community through the work of the setting. Families were welcomed into playrooms and staff took time to speak with them, updating on how the child had spent their day and important routines. As a result, positive partnership working was promoted.

Gathering the views of children, families and staff were important to the setting. They had begun this process with the review of their vision, values and aims. We recognised this was in the early stages. They plan to continue this to promote a shared vision for the setting that reflects the communities' aspirations for children.

The team strived to involve families in the life of the setting. They had a parent council who ensured families were consulted and had a voice in developing the service and experiences for children.

The leadership team had a quality assurance system in place that was beginning to have an impact. This would ensure high quality play and learning is at the heart of improving the service. Self-evaluation to support improvements on outcomes for children had not been documented. We signposted the service to 'A quality framework for daycare, childminding and school aged childcare' (Care Inspectorate, 2022) to support them to evaluate what was working well and identify areas for improvement. Engaging in a cycle of evaluation should inform the improvement plan. Consultation with children, families and staff should be part of this process (see area for improvement 1.)

Staff were led by a committed leadership team. They told us they felt supported, listened to, and 'loved' working at Early Steps Nursery. Staff had the opportunity to meet with the leadership team regularly to discuss their strengths, supports and areas they would like to develop. We encouraged the leadership team to document this as part of a cycle of professional development. Many staff described the team as a family. As a result, staff were happy in their role resulting in positive interactions with children and families.

Staff were beginning to lead on areas that interested them to support the development of the service and wider experiences for children and families. For example, family learning was offered, regular forest visits, garden development and supporting and understanding additional support needs. This meant that leadership roles were encouraged at all levels.

Areas for improvement

1. The ensure there is clear evidence of the impact improvements have on children's outcomes, the service should engage in self evaluation to support their cycle of improvement. This should include, but not limited to gathering the views of children, families, and staff and referring to relevant best practice guidance.

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

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

How good is our staff team?

4 - Good

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

Quality indicator 4.3: Staff deployment

Children and staff benefitted from increased staffing levels across the setting. The service now had three additional members of staff who were deployed effectively to ensure continuity of care and support. We recognised this had a significant positive impact on staff wellbeing and meeting the needs of children. Higher staffing levels meant children and families benefitted from family learning groups, weekly forest visits and continued developments in the setting.

Staff deployment was effective and meant the right staff were in teams to ensure there was balance of skills, knowledge, and experience. The team asked colleagues for support if a task took them away from the room. This meant children were supervised and staff were supported to meet children's needs. This had brought about a positive change and ethos across the service. One family commented "The staff are wonderful, personable, warm and appear to truly love their jobs."

Arrangements for absence and changes to the team were well managed. Staff were deployed in rooms where they knew children, had developed relationships and were familiar with children's interest. As a result, there was minimum disruption to children's routines.

Staff worked together to ensure the effective supervision of children, taking into account of meeting individual needs. Children who benefitted from one-to-one interactions from staff were supported effectively to ensure they could access the full provision, their preference and choices respected. Families commented "Staff and Early Steps could not do enough to support my child who needs additional support" and their "development has come on amazingly with help from all the staff! They are all super friendly and welcoming and make you feel like family!"

Communication had improved greatly across all teams. Regular staff meetings took place, minutes were documented to ensure all staff had relevant information and felt included in the service. Staff told us they felt communication had greatly improved. As a result, staff felt informed.

Families received regular communication and updates through the online app, face to face meetings and the parent council. Most families felt staff took time to talk to them at drop off and pick up times and told us communication was very good. They liked the app, felt informed and received regular updates on how their child had spent their day. Families' comments include "We have continuous communication and I feel I can trust them with my children.", "Great relationship with all staff caring for my child.", "They all know who my child is and their needs. We chat regularly when I pick my child up or drop off and they are genuinely engaged in how my child is or has been and always good at picking up on the smallest things."

Supporting staff to learn and develop in their role was effective through a programme of training and reflective discussions. Staff demonstrated commitment to their professional learning. For example, all staff were first aid trained, had recently completed training on 'Realising the Ambition' (Scottish Government, 2020), child protection and safeguarding and Epilepsy awareness. Some staff were able to talk about the impact training had on their practice, the environment, and the experiences they offered to support learning.

The service had begun to use the 'Early Learning and Childcare National Induction resource (Scottish Government, 2020) to mentor new staff and the existing staff team. We encouraged them to document the progress staff had made in using this and the impact this had on practice and outcomes for children.

Staff wellbeing was supported through regular discussions, team events and wellbeing days. They had a designated wellbeing officer in the team who they could speak with and who advocated on their behalf should additional supports be required. Staff told us they felt supported by each other, the wider leadership team, and the wellbeing champion. This had brought about significant improvements in the team's wellbeing and commitment to their role.

The service now had a system in place that followed guidance on 'Safer recruitment through better recruitment' (Care Inspectorate, 2023) to ensure new staff had gone through the appropriate processes. We recognised improvements had been made that ensured children were cared for by staff who had the right skills, experience, and qualifications for the role.

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

For children's health, welfare and safety needs to be fully met, the provider should ensure that all parts of children's personal plans, including registration information is reviewed and updated in consultation with children and families. Plans should be reviewed when changes to information occur, or at least every six months.

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 area for improvement was made on 12 June 2023.

Action taken since then

Personal plans were in place and had been reviewed with families and children in line with guidance. Plans documented what was important to the child and how staff would support children to reach their full potential. We were confident progress had been made and this area for improvement had been met.

Previous area for improvement 2

For all children to develop and learn at an appropriate pace whilst being supported to direct and lead their learning, try out their ideas and test their own theories, the provider should ensure that all staff are trained to develop a sound knowledge and understanding of child development. This would include current national practice guidance to deliver high quality play and learning experiences. Staff should then apply their training in practice to improve outcomes for children.

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

This area for improvement was made on 12 June 2023.

Action taken since then

Staff had received training that looked at child development, learning and the importance of the environment. Some staff were able to talk about the impact of this learning on their practice and improvements they had made to play spaces. We were confident progress had been made and this area for improvement had been met.

Previous area for improvement 3

To ensure that each child is safely cared for during their time in the service, the provider should monitor staff use of daily registers to ensure that all staff know at all times how many children are in their care. This should include, but is not limited to, being knowledgeable in the Care Inspectorate SIMOA Campaign (2021) to raise awareness of how, and why, children could leave a childcare setting without a responsible adult. Risk assessments for outings and mini bus trips should be reviewed and updated with all staff being knowledgeable about potential hazards when on outings and trips away from the service.

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

This area for improvement was made on 12 June 2023.

Action taken since then

The service had introduced a system to record and monitor children's attendance. Whiteboards and registers were in each room. We found that these were not being updated consistently across all rooms when children left the setting with an adult. We reminded the service to look at the SIMOA campaign (Care Inspectorate, 2021) with staff to raise awareness of how, and why, children could leave a childcare setting without a responsible adult. Risk assessments for outings and mini bus trips should be reviewed and updated with all staff being knowledgeable about potential hazards when on outings and trips away from the service. This area for improvement had not been met and will be looked at during the next inspection.

Previous area for improvement 4

To ensure that children are cared for by staff who have the right skills, experience, qualifications, and values. The provider should ensure that effective safer recruitment and selection practices are in place. This should include, but is not limited to, being knowledgeable in the guidance: Safer Recruitment Through Better Recruitment (Care Inspectorate and Scottish Social Services Council (SSSC), 2016) and using this knowledge in practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 12 June 2023.

Action taken since then

The service had made significant progress in ensuring staff were recruited safely, had the right skills, experience and qualifications for the role. They had used 'Safer Recruitment Through Better Recruitment (Care Inspectorate, 2023). We were confident progress had been made and this area for improvement had been met.

Previous area for improvement 5

To enhance outcomes for children through effective supervision and quality engagement, the provider should support staff to be more proactive in recognising where gaps exist and ask for help from colleagues in other rooms.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'People have time to support and care for me and to speak with me.' (HSCS 3.16).

This area for improvement was made on 12 June 2023.

Action taken since then

The service had made significant progress in supporting staff to work together to identify and support colleagues from other rooms when needed. There was now three additional members of staff who were deployed to ensure staff absence and holidays had minimal impact on outcomes for children. We were confident progress had been made and this area for improvement had been met.

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?	4 - Good
1.1 Nurturing care and support	4 - Good
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?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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