

Scout Hall Playgroup Day Care of Children

Scout Hut
Old Skene Road
Westhill
AB32 6RL

Telephone: 01224 742 455

Type of inspection:
Unannounced

Completed on:
19 March 2024

Service provided by:
Scout Hall Playgroup

Service provider number:
SP2003000531

Service no:
CS2003002670

About the service

Scout Hall Playgroup is registered to provide a care service to a maximum of 24 children. The age range of the children will be two and a half years to those not yet attending primary school. The playgroup is accommodated within the Scout's Hall in Westhill and has use of the large hall, kitchen, and toilet facilities. There is an enclosed outdoor area which the playgroup has the sole use of during operating hours. The service is within easy access to the local amenities such as the parks, woodland areas, and shops.

About the inspection

This was an unannounced inspection which took place on 18 March 2024 between 09:00 and 13:00 and 19 March 2024 between 09:15 to 10:30. Two inspectors from the Care Inspectorate carried out the inspection.

To prepare for 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:

- observed children using the service
- received feedback from 11 families from our online questionnaire
- received feedback from eight staff from our online questionnaire
- spoke with the staff and management team
- observed practice
- reviewed documents.

Key messages

- Children were nurtured and supported throughout their day by staff who were caring and knew their needs very well.
- Mealtimes were relaxed, social experiences offering opportunities for independence.
- Parental engagement and involvement were a key focus for the service.
- A long serving and well-established staff team supported continuity of care for children and families.
- The planning and observation cycle was under development, supporting high quality outcomes for children.
- Nappy changing facilities did not support effective infection prevention and control.

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?	5 - Very 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 quality indicator 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 were confident within the service and were having fun exploring and learning with their friends and staff. Staff interactions were respectful, caring, and compassionate. Staff responded appropriately and respectfully to children's care needs. Children routinely asked staff to play with them and it was clear they enjoyed each other's company. This meant children were happy, relaxed and well cared for. Parents told us, "I like this service as it provides a safe, secure, fun environment for my child to learn and explore and interact with other children," and "My little one enjoys going in. Knowing they go in happily makes me feel at ease."

Personal plans gathered information from families that was mostly relevant to the continued care and wellbeing of children. Information gathered in 'All About Me's' supported the staff team to consider the interests and needs of children. For example, several parents had commented that their child was working on developing road safety and the staff team had planned experiences to support children's knowledge and understanding. A parent told us, "During my child's potty training the staff really worked with me to ensure we were following the same routines. My child is yet to have an accident at playgroup!!" Care plans were in place for children who required them. Staff knew children well and had a good knowledge of individual care needs. However, care plans did not contain enough detail on how to manage individual needs effectively. We suggested care plans should be updated to reflect staff's knowledge. This would ensure children experience consistent approaches from all staff, including relief staff members.

Children experienced relaxing, unhurried, and sociable mealtimes. Staff sat with children and engaged in meaningful conversations, which contributed to their language development and making sense of the world around them. Children could come for snack when they were ready supporting their choices and wishes. Opportunities to develop independence at mealtimes had been considered and children were seen to be self-serving foods, pouring their own drinks, and clearing their dishes. As a result, children were building life skills and supported to be healthy.

Children were kept safe and well by knowledgeable staff in the safe administration of medication and in safeguarding children. Staff were confident in who to go to if concerned about a child's wellbeing. This helped ensure children were supported to be safe and healthy.

Quality Indicator 1.3: Play and Learning

Children benefitted from periods of uninterrupted play allowing them to lead their play and follow their interests. The daily routine had been considered to ensure minimum disruption to children's play and learning. For example, as children were offered choice, snack and other routine activities did not impact their play. As a result, children had autonomy and were engaged.

Children's language, literacy and numeracy skills were supported through play. A range of mark making materials, free access to books and adults reading with children offered children opportunities to develop language and numeracy skills. Children benefitted from natural, open-ended resources in the indoor space.

We agreed with the staff team that this could be further developed, for example, more real-life resources such as scales and measuring implements in the home corner and block centre. This would further support children to develop their curiosity and imagination. Interactions between staff and children were supportive and encouraging, supporting children with turn taking and colour recognition. We suggested the staff team should consider the use of open-ended questioning to support children's thinking and problem-solving skills.

Regular observations of children's experiences and next steps were recorded and shared with families through an online platform. One parent told us, "I love the learning journeys and getting updates most sessions to see all the fun activities he's been up to." All families who responded to our survey either strongly agreed or agreed with the statement: 'I am fully involved and informed about my child's learning and development'. We found there was a variation in the consistency in quality of observations. This was an ongoing area for improvement and staff were currently undertaking further training to support consistent approaches to support the identification of children's progress and next steps.

Planning approaches were mainly responsive to children's current interests and life experiences. Next steps from observations were used to ensure resources and experiences offered children opportunities to investigate interests and develop skills. Staff should now consider recording experiences in partnership with children. This would offer opportunities for children to revisit and reflect on their learning, with adult support. Daily evaluations of planned approaches should be considered to further ensure planning is effective and children access meaningful resources and experiences.

Children's opportunities were enhanced through the strong community connections. For example, trips within the local community, visits from other professionals, nurseries, parents, and family members supported children to be included and offered a sense of belonging.

How good is our setting?

4 - Good

We evaluated this quality indicator 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

The service operates as a pack away service in a shared space. Play spaces were clean and well-maintained. Furnishings supported children to access them safely and independently as they were at children's height. Children's photos and artwork was displayed on pack away boards, providing them with a sense of belonging. Comfortable and cosy spaces offered children spaces to rest and relax, however, there was scope to develop this. For example, soft furnishings, lamps, and greenery could be used to soften the spaces, to promote a more comfortable and homely environment within the main play area.

Children had access to a range of resources indoors and were able to make independent choices during free play. Resources were easily accessible and developmentally appropriate. These included some open-ended and real-life resources promoting children's curiosity and creativity. A parent commented, "My child always comes away smiling after being at playgroup. Whether they have learnt a new song or been exploring outside and always has drawings and paintings to take home." An outdoor play area was available. However, due to weather conditions, this had not been used. Staff told us in better weather, children have free flow access to outdoors. We encouraged them to consider how this could be managed all year round, further supporting children to lead their play and learning.

Children's safety benefitted from a range of regularly reviewed risk assessments. These considered potential hazards and benefits of activity or resource. Children were encouraged to contribute to risk assessments, for example, considering boundaries whilst at the woods. This supported them to be safe and develop life skills.

The nappy changing facilities did not support effective infection prevention and control measures. Nappy changing was completed on a changing mat on the floor of the bathroom. Work was needed to ensure that there were suitable nappy changing facilities. These should meet current best practice guidance, including 'Nappy changing facilities for early learning and childcare services: Information to support improvement'. A responsive management team had started to consider possible solutions. This will ensure good infection control practices, further supporting the health and wellbeing of children. **(See area for improvement 1.)**

Children's personal information was stored securely to ensure families privacy. Information was accessible to relevant staff whilst remaining confidential.

Areas for improvement

1. The service should ensure that children have access to appropriate nappy changing facilities and receive personal care in an environment that supports high levels of infection, prevention and control.

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

'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4).

How good is our leadership?

4 - Good

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

Quality Indicator 3.1: Quality assurance and improvement are led well

The service's vision, values and aims were displayed at the front entrance of the service. Staff reviewed these regularly and shared with parents. This could be developed by considering input from children and families. This would ensure these were reflective of the needs of the children and families at present.

Stay and play sessions and information sessions for parents, offered some opportunities for children and families to be involved in the service. Formal and informal consultations with families allowed them some influence in service delivery. Formal questionnaires had been used to gather parents' views and opinions. We found some of these has been collated and the outcome fed back to parents, helping to ensure they are valued and included.

Leaders were passionate and committed to their role to help ensure positive outcomes for children. All families that responded to our questionnaire told us they were confident that the setting was well-managed. Comments included, "I feel that I have total peace of mind when my child is at playgroup, my child is being left in a well-managed and safe environment," and "Very well-managed."

Quality assurance processes were regularly completed. Results from audits and monitoring of practices

should be recorded and shared with staff to further support improvement. The staff team engaged with key good practice documents to support reflection and self-evaluation. This enabled them to identify relevant and appropriate areas for improvement. Improvement plans in place were reflective of the current needs of the service. These highlighted changes to be made and recorded when they had happened. Evaluations on the impact of changes would further support reflection and identification of relevant next steps. This would help ensure children and families access a high-quality service.

Overall, the management team worked well together with a shared understanding of the service they provided. They knew the service strengths and areas for further improvement. They were fully aware of the direction they wanted to go and were committed to achieving this.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 4.3: Staff Deployment

Staff worked extremely well together to create a positive, caring, and welcoming environment. Children benefitted from a nurturing and caring staff team who knew them well. They worked well together to ensure children's needs were met. Interactions were positive and staff were seen to get down to children's level. This nurturing approach resulted in children being listened to and respected. A parent commented, "The staff are amazing, have so much time for my child, helped them settle and have made their time at playgroup fun." Another parent commented, "My child absolutely loves the Scout Hall playgroup. The staff are caring and very welcoming and my child has a really lovely bond with them all."

Staff were clear on their roles and the routines of the day. Clear and respectful communications helped ensure staff were aware of each other's whereabouts and what they were doing. This helped ensure children were well supported and supervision levels were maintained throughout the day, helping keep children safe.

Communication with parents was well considered. For example, newsletters and handovers at the end of sessions supported parents to be informed. A parent told us, "I have always been very impressed with the amount of information we receive and how kept in the loop we are." Drop off and handovers were managed at the door of the service. Management shared that they felt this was an ongoing result of Covid-19 and it was impacting negatively on parent relationships. We shared the good practice document on the Care Inspectorate Hub, 'Me, my family and my childcare setting' to support further engagement.

Children benefitted from a dedicated and skilled staff team. All staff had completed basic core training such as first aid, food hygiene and child protection as well as a range of further training opportunities. We were confident staff had a good understanding of what to do in the event they had concerns about a child, helping ensure children are safe from harm.

Staff reported that they felt well supported by each other and management. Most staff had been employed for several years and had built strong working relationships. An induction checklist was available for new staff members. We signposted the service to 'The National Induction Resource' on the Care Inspectorate Hub for use in the future.

An appraisal and support system were in place to support staff and encourage professional development.

These celebrated successes and helped identify potential areas for improvement. Staff had set individual goals to support key areas of personal development. We suggested goal setting could be more robust to ensure they are measurable and achievable to support effective evaluation and progress.

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	5 - Very 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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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