

St Anne's Early Learning and Childcare Class Day Care of Children

St Anne's Primary School
Park Drive
Park Mains
Erskine
PA8 7AE

Telephone: 03003000157

Type of inspection:
Unannounced

Completed on:
26 March 2024

Service provided by:
Renfrewshire Council

Service provider number:
SP2003003388

Service no:
CS2003014763

About the service

St Anne's Early Learning and Childcare Class is provided by Renfrewshire Council, and is registered to provide a daycare of children service to a maximum of 72 children aged from three years to those not yet attending school.

The service is located in the Erskine area of Renfrewshire and is within the grounds of St Anne's Primary School. The premises include two large playrooms, a small side room and a large outdoor area.

The service is close to transport links and other local amenities.

About the inspection

This was an unannounced inspection which took place on 25 March 2024 between 08:15 and 17:00. A further visit took place on 26 March 2024 between 08:30 and 18:00. 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 using the service
- reviewed Microsoft survey responses from 28 parents and carers using the service
- reviewed Microsoft survey responses from five staff
- spoke with staff and the senior leadership team
- observed practice and daily life
- reviewed documents.

Key messages

- Children were safe, loved and secure in their attachments with staff.
- Staff were kind, caring and nurturing in their interactions with children.
- Improvements were needed to extend and challenge children's play and learning opportunities and experiences indoors/outdoors.
- The service should continue to embed quality assurance systems and ensure this impacts positively on all areas of practice.
- The senior leadership team should oversee and prioritise the deployment of staff to further support children's independence and self-directed learning between the indoors/outdoors.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	3 - Adequate
How good is our setting?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

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

How good is our care, play and learning?

3 - Adequate

We evaluated this key question as adequate, where strengths just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support.

Children experienced a warm and nurturing approach from kind and compassionate staff. Staff understood the importance of developing secure attachments. They knew the children well, including their personalities and family backgrounds.

While there was a system in place for personal planning for children, on the files sampled, we found that not all children had a personal plan within the recommended 28 days of starting the service, and some plans were not regularly reviewed or updated. If implemented, a collaborative approach with parents/carers would strengthen the process and ensure a comprehensive understanding of children's needs and preferences, which can be used to develop tailored strategies for promoting children's health and wellbeing. The senior leadership team, fully understanding the challenges faced by the staff, recognised this and shared how absences and the use of temporary staff contributed to the lack of necessary information recorded to further support children.

The senior leadership team needs to ensure timely personal planning for all children, which is of the utmost importance, and conduct an audit, including a review of these working documents to further support children in receiving nurturing care and support that meets their needs. This should be a key area for improvement. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

The planning of support for children with additional needs was effective, and strategies were implemented in collaboration with parents and external agencies to ensure that care and support were tailored to each child's unique needs. This level of effective planning instilled confidence in the care provided.

Personal care for children was carried out sensitively and in response to children's needs. Careful consideration was given to protecting children's dignity and privacy.

The improvements to the lunchtime routine on the second inspection day had a positive impact. Staff provided children with a more relaxed and unhurried social experience. They sat with children, engaged in meaningful conversations, and were readily available should an emergency such as choking occur. This approach, if applied at all mealtimes, will ensure the safety of children. Meals were mainly nutritious, mostly reflective of relevant best practice guidance, and catered to children's preferences and allergies.

Children with complex medical needs had medication procedures and processes that kept them healthy and safe. Storage of medication was in line with best practice guidance. A robust system overseen by the senior leadership team, to ensure medication is being monitored and audited, such as regular checks and documented records, would ensure medication for all children is managed well. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

Quality Indicator 1.3: Play and learning.

Children had access to various play materials such as building blocks, creative resources and sensory toys. By enriching the play materials and provocations such as through open-ended questions or suggesting new ways to use them, would significantly enhance the balance of spontaneous and intentional learning experiences. This will create a more comprehensive learning environment and empower staff to support children using transferable skills, revisit enjoyed activities, and make connections in their play and learning, supporting their overall development.

While play experiences improved on the second inspection day, with activities such as baking and a puppet show, the importance of having daily fun and exciting opportunities that stimulate children's curiosity and creativity would contribute to children's learning and development and allow them to explore new ideas, develop problem-solving skills and enhance their social and emotional development.

Staff provided additional support for children who required adult assistance to play. The use of visual aids to facilitate communication and understanding of play routines significantly impacted these children. Including them in the play activities enhanced their wellbeing, making them feel valued and included in the setting.

Online journals shared with parents/carers provided an account of their children's daily activities and learning experiences, and informed them about their children's learning and development journey. However, some parents/carers' feedback told us they would like more information about what their children did each day and how they were progressing, indicating their strong interest in staying connected. Staff should use parent/carer feedback to shape their approach and enhance their involvement, making parents feel more connected and informed. Observations of children's play and learning were mainly descriptive, with some that contained qualitative information linked to curricular guidance and milestones. The observations could have been extended further by ensuring the next steps in learning such as skills or concepts to be learned, were revisited.

Floor books were recently introduced to document children's play and learning and sparks of interest. However, the planning processes needed to evidence where children were supported in developing new skills or where learning had been extended. For example, evaluation and next steps, which refer to assessing current skills and identifying future learning goals, had not been determined to add depth and provide a more comprehensive understanding of the learning process.

The recently introduced progression pathways should further support staff in capturing children's learning and highlight the following steps and gaps for action, enhance staff's understanding of children's progress and guide them in providing the best learning opportunities.

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.

The environment was bright, clean and welcoming for children. Playroom registers, boundary fencing and gates and a secure entry system kept children safe. Individual risk assessments were in place for identified children, supporting their safety.

Staff used daily checklists to ensure the environment was safe for children. External doors leading to the enclosed garden area were fitted with alarms that loudly buzzed when doors opened. We discussed how this interrupted children's play and might lead to children being desensitised to a real emergency. Implementing robust risk assessments indoors and outdoors would further enhance children's safety and provide a secure environment for children to enjoy freely chosen fun and challenging experiences indoors and outdoors.

Indoors, children had areas to rest and relax when needed. The Sparkle room, a designated space for calming activities, holds great potential to develop further and support all children in self-regulating their emotions. The availability of soft furnishings, although temporarily removed during the inspection for another activity, is a key element in meeting children's comfort needs and providing a safe space for them to unwind and recharge.

Staff understood the importance of outdoor play to children's health, wellbeing and development. Almost all children used the outdoor environment in all weather conditions. We discussed how better use of visual aids/resources could further enhance children's free flow play and staff's management of this.

We reviewed evidence showing that children had participated in specific community activities such as intergenerational visits to a local care home. Further opportunities in the local community such as visits to the library, shops or parks would benefit children in developing an awareness and connection with their local community to support their sense of belonging, develop their social skills and enhance their play and learning experiences.

Accidents and incidents were recorded in children's files and shared with their parents/carers. An audit by senior leaders, including a review of these records, would help them identify common or reoccurring concerns and the appropriate action required to maintain children's safety. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

Infection prevention and control measures such as regular handwashing, helped reduce the potential spread of infections. Nappy changing and toilet facilities were clean and tidy, and porous material storage reflected best practice guidance.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality Indicator 3.1: Quality assurance and improvement are led well.

The senior leadership team actively participated in the inspection process demonstrating their commitment to delivering a quality service for children, staff, and families. Their engagement and receptiveness to feedback and suggestions highlighted during the inspection, when implemented, should support their continuous improvement.

Senior leaders involved families within the setting, fostering positive connections and promoting positive outcomes for children. Providing access to the cloakroom at handovers and the opportunity for parents/carers to discuss their children's care were particularly beneficial. The Book bug sessions also played a crucial role in engaging parents/carers in their child's learning, fostering a sense of connection and involvement. While senior leaders were proactive in keeping parents informed about staff changes, regular access to the playroom would further enhance this communication and ensure families were fully informed

about their children's daily care, play and learning.

The service's vision, values and aims were shared with the school community. Senior leaders and staff should revisit these and use improvements identified in this inspection to ensure they are fully embedded in the nursery, thereby guiding the direction of the service.

Senior leaders ensured staff played a vital role in self-evaluation and improvement practices, contributing to establishing a culture of continuous improvement. Further use of national best practice guidance and the involvement of children and families would further support them in implementing changes and reviewing aspects of the provision, ensuring all stakeholders benefit from these improvements.

Almost all staff had opportunities to attend one-to-one meetings with the senior leadership team. This was an opportunity to reflect on their childcare practice and further support professional development.

Most staff told us senior leaders valued and respected their views and opinions. However, some felt nothing was actioned when they raised points that were not working, leaving them feeling demotivated. Staff told us that more time for staff meetings around planning and improving the setting would further develop their confidence and meaningfully influence positive change within the setting. The senior leadership team acknowledged the importance of ongoing communication across the staff team to ensure that all staff felt valued and listened to about changes and service improvements. It was discussed that current staffing challenges have resulted in challenges in ensuring consistency and frequency of meetings.

Senior leadership meetings were regularly held to support key messages being shared with staff. A quality assurance calendar was in place. However, monitoring and auditing processes across the setting were not robust, leading to inconsistencies in staff practice and high-quality care play and learning for children. (See area for improvement 1)

With its numerous notifications and updates, the service was aware of its duty to report to the Care Inspectorate. However, our inspection revealed disparities between the reports we received and those reported to the local authority for reporting accidents/incidents. Revisiting the notification guidance and maintaining communication with all relevant bodies should enhance the comprehension of incident reporting. This will ensure consistent information communication and provide a more comprehensive oversight of the service, focusing on prioritising children's health, safety and welfare. (See area for improvement 2)

Areas for improvement

1. To support children's health, wellbeing and play and learning, the provider should ensure senior leaders have quality assurance approaches that are developed in line with relevant best practice guidance. This should include, but is not limited to, monitoring and auditing personal planning, medication management, accident/incident processes, play and learning experiences and staff deployment.

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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems' (HSCS 4.19).

2. To ensure that children experiencing care have confidence, the service they receive should be well led and managed. The provider should ensure senior leaders report serious accidents/incidents, liaising with all governing bodies. This sense of responsibility and accountability is crucial in maintaining the children's and their families' trust.

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?

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.

Staff were supportive, kind and nurturing towards the children and engaged with them at their level. Staff worked well together, supported one another and were eager to get it right for the children in their care.

Children were observed chatting and laughing during interactions with staff. This demonstrated positive relationships had been built. The use of walkie-talkies helped staff communicate with each other indoors and outdoors, thereby ensuring the safety of children.

Senior leaders were available to support staff in the playroom and during busier times of the day such as lunch breaks. This promoted positive relationships as children had the opportunity to build relationships with all staff.

Staff had differing skills, knowledge and expertise which they should continue to develop to meet the needs of the children in their care. The development of championing roles such as numeracy and literacy champions was used to support play experiences and interactions for children. However, for staff to enhance children's learning further across the setting, it is important to consider training using skilled questioning, such as higher-order thinking skills to significantly support and extend children's thinking, problem-solving and curiosity.

The daily staffing levels met staff-to-child ratios. However, the challenges in staffing and the senior leadership team's acknowledgement of increasing need significantly impacted the staff's ability to consistently provide high-quality care, play, and learning. This resulted in not all children being suitably challenged or receiving responsive input. Despite these difficulties, the staff team remained dedicated and demonstrated professionalism. The senior leadership team was supportive and committed to finding solutions that promote staff and children's continual wellbeing, providing a strong sense of reassurance and trust.

Staff were strategically deployed in specific areas of the setting reflecting their interests and skills. Some staff told us that they were encouraged by senior leaders to remain in these areas. As a result, we did not always see staff following children throughout their play between the indoors/outdoors to allow children to fully lead their own play. To support improvement, the senior leadership team should oversee and prioritise flexible staff deployment to ensure it caters to all children's needs, promoting children's independence and self-directed learning. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

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	4 - Good
1.3 Play and learning	3 - Adequate
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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