

Cramond Early Learning and Childcare Day Care of Children

26 Whitehouse Road Cramond Edinburgh EH4 6NN

Telephone: 01316 038 409

Type of inspection:

Unannounced

Completed on:

28 March 2024

Service provided by:

Bright Horizons Family Solutions Ltd

Service provider number:

SP2003000319

Service no:

CS2005110301



About the service

Cramond Early Learning and Childcare is registered to provide a day care of children service to a maximum of 101 children aged from birth to those not yet attending primary school, of whom no more than 48 are under two years of age. The service provider is Bright Horizons. The nursery works in partnership with the City of Edinburgh council to provide funded early learning and childcare to eligible children.

The service is situated in the residential area of Cramond and is close to local amenities. The premises is made up of five playrooms for different ages of children, three outdoor spaces, a dining space with reception area, a kitchen providing meals and snacks, toilet and changing facilities suitable for the age of children, staff rooms and offices.

About the inspection

This was an unannounced inspection which took place on Tuesday 26 March 2024 between the hours of 08:45 and 17:00. We returned to complete the inspection on Wednesday 27 March 2024 between the hours of 09:00 and 17:00. 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 the last inspection report, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- received 43 responses from parents to our electronic request for feedback
- received four responses from staff to our electronic request for feedback
- · spoke with and interacted with children
- · spoke with staff and management
- · observed practice and daily life
- reviewed documents relating to children's care and learning and the management of the service.

We provided in-person feedback to the service on Thursday 28 March 2024. In attendance were the registered manager and a representative from the City of Edinburgh Council. A senior representative from the Bright Horizons provider group attended via a Microsoft teams call.

Key messages

Two areas for improvement made at the last inspection have been met, as improvements had been made to children's personal plans and staff deployment.

To support the service on their improvement journey moving forwards, three new areas for improvement have been made. These are in relation to the outdoor spaces, cleanliness and quality assurance.

In general, children were happy and actively involved in leading their play and learning.

The manager's passion and dedication were evident. This helped to promote a culture of reflective practice to help children achieve their full potential.

Staff communicated well with one another to ensure that children's wellbeing needs were met effectively.

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?	5 - Very 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?

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 1.1 Nurturing care and support

In general, children experienced caring, nurturing interactions with staff. Staff were quick to respond to children's non-verbal and verbal cues. As a result, children developed trust and had reassurance that they could depend on adults to identify and meet their needs. Staff validated children's emotions and offered genuine affection in the form of cuddles. Staff skilfully adapted their approach to reflect children's different stages of development, for example staff used effective questioning to empower older children to consider what could help them to feel better and to assert their needs amongst their peer group. In this way, children developed self-assurance and self-respect along with skills in empathy. Parents' comments included; "The staff that look after my child are second to none. Genuine care and affection and I have full confidence in leaving my child in their care".

During mealtimes, children ate within a relaxed atmosphere at their own pace. The nutritious meals were presented attractively. This resulted in the majority of children eating with enthusiasm and developing a healthy relationship with food. Where children did not like a food, alternatives were offered. This meant that children's perspectives were respected. Staff facilitated opportunities to promote children's independence skills as they served their own food and drink. The service was committed to promoting a calm transition to lunchtime across all playrooms to help increase children's wellbeing and show greater respect for children's play agenda.

Improvements had been made to children's personal plans to make these more meaningful, working documents. Key persons were allocated protected time to facilitate more extensive assessments of children's wellbeing alongside parents. This helped build positive relationships and resulted in children settling into nursery more successfully. Moving forwards, the service was committed to ensuring information in relation to children's needs and support strategies is documented more explicitly. This would help to demonstrate how staff have used their knowledge of child development and skills to empower children to achieve.

Staff skilfully used their knowledge of child development to influence multi agency decision making. This helped to ensure children got the help they needed and that this reflected their best interests. One parent told us, "The staff have been a fantastic support to both my child and us as a family and always very accommodating to provide my child with the additional support they need". Individualised support plans celebrated children's strengths. Sensitively attuned approaches used by staff, along with resources within the environment, contributed towards children's sense of safety and security and enabled children to achieve.

Children's medication was effectively managed as per best practice guidance. Robust, individualised plans were in place, so children could have confidence that staff were well-equipped to meet their health needs. Strengthened quality assurance systems will help ensure consistency in the reviewing process of children's health care plans.

Quality indicator 1.3 Play and learning

In general, children were happy and actively involved in leading their play and learning. This was achieved through a balance of spontaneous and planned high quality experiences that promoted children's choice and independence. Free flow play indoors and outdoors was facilitated for the older children. Outdoor learning opportunities were extended as children discussed going to the park, the woods and the beach. This enabled children to learn about the resources in their local community and nature. We observed naturally occurring group experiences led by children's requests and interests. Children could choose to take part in these or continue following their own play agenda. These child centred approaches upheld children's right to play and involved children in decision making.

Staff had used self-evaluation tools to reflect on how children were using environmental spaces and made improvements. Within one of the playrooms, staff noticed that children congregated in one area. Changes were made to the design of the room which resulted in children engaged in more sustained play and having more space to expand on their creations.

Planning approaches reflected children's interests and life experiences. Children used resources to independently create a train and bridge. This led to discussions on train stations and bridges that the children had visited. Staff facilitated opportunities to research more about these. Staff had identified opportunities to strengthen the documentation around empowering children to lead their own learning. The staff team were receptive to our suggestions on how to enhance the evaluation process, so this highlights the significance of children's learning.

We saw that the planning took account of individual children's needs and stages of development. This could be further developed in some rooms to provide a richer variety of planned experiences. For some children we saw that staff were identifying that children needed more challenge than others and this was supported effectively, helping children to be confident and capable learners. Staff also discussed moving children up into more challenging spaces early where this was developmentally appropriate to support their learning. This meant that children were supported to achieve developmental progress at a pace that was right for them.

Observations documenting children's learning demonstrated staff knowledge of child development. Children's next steps were appropriate and acted upon to enable children to progress well. Moving forwards, the service intended to use quality assurance systems to help promote quality observations across the staff team

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

Thoughtful planning had gone into the design of the main entrance area to reflect the service's ethos and value base. Parents were invited to provide feedback in a book in relation to a recent family learning opportunity. Children's rights were referenced on an easel and parents left comments on how the service had helped to promote these.

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A comfortable seating area and fish tank contributed to a homely, relaxed atmosphere. All of this helped children and families to feel welcome and valued.

The setting was inviting and had good natural daylight and ventilation. The staff team set up their rooms in a way which was appropriate for the age and stage of the children who were being cared for. Activities and experiences were arranged on low tables or on the floor and toy storage was easy for children to access independently. In some rooms, the staff had cosy spaces for children to self-regulate. Consideration could be given to how this could inspire practice across all the playrooms.

Outdoor spaces were well used by the staff team to provide active physical play, sensory experiences and we saw that they were used in all weather. Some staff saw opportunities to build on children's experiences, for example creating bubbles in a puddle. However, the pre-school garden area would benefit from work to improve the variety and depth of challenge offered. We highlighted potential risks, for example the trellising on the external fencing which provided climbing opportunities in an area of the younger children's garden which is often hidden from staff view (see area for improvement).

The equipment used was generally safe, however some equipment was looking tired, for example the home corner furniture in one of the playrooms. Improving maintenance systems and replacing equipment would not only reduce the potential risk of harbouring bacteria but promote value-based practice by increasing children's sense of worth.

Children knew when to wash their hands and were supported to do this independently. We noted that staff handwashing supported children to learn about how to prevent the spread of infection. Snack and mealtimes were provided at clean tables. We saw that staff cleaned up at appropriate times after natural ends to messy experiences, however there was a lack of deep cleaning happening of some equipment and some areas. For example, sand remained in children's feeding chairs and there was unclean equipment in the children's toilets. When discussed with the management team, they had already identified some issues and had a meeting scheduled with their external cleaning team. Improvements were needed to help address the gaps highlighted to make the environment cleaner and better cared for (see area for improvement).

There were more children needing to sleep than the rooms had space for in the baby rooms. There was a lack of clarity around how this should be managed to ensure that both the children being settled to sleep and those who were staying awake and playing would have positive experiences. We encouraged the service to review their plans to help ensure that all children's needs are fully met at these times.

Areas for improvement

1. To support children's safety, wellbeing and development, the provider should improve the outdoor spaces.

This should include, but is not limited to, taking forward plans to renovate the pre-school garden and increase learning experiences. In addition, potential risks within the younger children's garden should be removed or minimised.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31) and 'My environment is safe and secure' (HSCS 5.17).

2. To support children's health and wellbeing, the provider should make improvements to the cleanliness of the service.

This should include, but is not limited to, ensuring children's resources and equipment are thoroughly cleaned.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

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 improvement are led well

Children, parents and staff were involved in shaping the service's vision values and aims. Their feedback had been incorporated into the final version. Within the improvement plan, the service communicated their commitment to ensure this is translated into children's experiences. As documented within quality indicators 1.1 and 1.3, we observed children to be nurtured, loved, have fun and achieve developmental progress. Moving forward, the service was committed to ensuring the service's vision, values and aims were embedded within all staff interactions with children. This will help ensure positive outcomes are consistently secured for all children.

The views of children and parents were actively sought and acted upon to promote meaningful participation. The service facilitated an active parent forum. Within this, parents had requested to upload photos and observations from home to share learning experiences and this was being progressed. Parents completed Microsoft forms to influence the staff appraisal system. Staff received complimentary feedback from parents. The manager facilitated reflective conversations with staff to help them to reflect on ways to enhance their practice. Children had been consulted with on the plans to improve the design of the garden. The children wanted more opportunities to climb. The service had researched ways to achieve this to inspire children's curiosity and offer children developmental challenge.

The manager's passion and dedication were evident. This helped to promote a culture of reflective practice to help children achieve their full potential. This filtered through the staff team. Staff were empowered to initiate well informed change and take ownership for making improvements. For example, staff had developed their room to allow 360 learning in the environment. This led to the room being well used in all areas and children accessing a rich variety of experiences, including building Lego on the walls and a tree den to help children to regulate their emotions.

The service was committed to promoting a nurturing ethos and had introduced a comprehensive nurture-based programme to help achieve this. This involved assessing staff knowledge and skills and carrying out environmental audits. We recognised the positive impact on children's experiences. For example, observations of staff carried out by the management team highlighted warm, nurturing interactions with children. Team leaders were empowered to have courageous conversations with staff to develop staff self-awareness and the impact of their actions on outcomes for children.

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Staff embraced this feedback, and this resulted in an increase in the quality of interactions between staff and children, including demonstrating greater empathy and validating children's emotions more. We reported on how this had impacted on children's experiences positively in quality indicator 1.1 Nurturing care and support.

Quality assurance audits had been introduced. We noticed differences in approaches used across the management team; some were more extensive than others. This highlighted the need for more consistency. This would help make quality assurance systems more robust and meaningful, so staff can be empowered to build upon strengths in their practice and take forward areas for improvement to enhance outcomes for children (see area for improvement).

The manager was generally aware of the gaps in practice highlighted within our feedback and was taking action to make improvements. This helped to provide us with confidence in the service's capacity for improvement. The manager was aware that they needed to protect their time to ensure quality assurance processes were carried out effectively. This would help demonstrate the service's improvement journey and the impact on outcomes for children (see area for improvement).

Areas for improvement

1. To support children's wellbeing, learning and development, the provider should develop and embed robust quality assurance systems.

This should include, but is not limited to, ensuring a thorough, consistent approach to undertaking audits amongst the senior leadership team, making sure support strategies within children's personal planning are explicit and have a positive impact on children's development and promoting high quality and value based practice within all staff member's interactions with children.

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' (HSCS 4.19).

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 communicated well with one another to ensure that children's wellbeing needs were met effectively. We saw that they worked well as a team, delegating key tasks to their colleagues to reduce disruptions to children's play. For example, asking for support from colleagues to complete daily tasks where a child showed a particular attachment to them and needed continuity of care. This helped children to have secure attachments and feel safe in the nursery.

Arrangements were in place to promote continuity of care across the day and ensure positive transitions and communication with families. Staff shift patterns had been developed to provide consistency of care throughout the day for children. This meant that parents could speak with familiar staff at the beginning and end of the day which helped build positive relationships and trust.

The service invested in staff wellbeing, recognising the positive impact this had on outcomes for children. Additional staff covered staff breaks to ensure children's needs were met while staff had the opportunity to relax and be refreshed. Through distributive leadership, some staff had developed a wellbeing room which included a massage chair and mindfulness activities. This helped staff to be emotionally available for children.

Busier times of the day, such as mealtimes were recognised and planned for. This ensured that staff could fully meet children's needs. For example, staff deployment during mealtimes in the 'turtles' playroom was very effective, allowing staff who were sitting with the children to fully engage with the social aspects of mealtimes while the 'runner' collected extra servings and fresh cutlery. This resulted in a relaxed, enjoyable experience for children.

Staff talked passionately about taking responsibility for specific areas of the room, for example 'construction' or 'creative' areas. We saw that this was working well in some areas where leaders had a good overview of the practice and experiences being provided. To ensure that all children have rich experiences in all aspects of their play, leaders will need to develop their skills in supporting all staff to provide high quality experiences and interactions consistently.

Parents' comments included; "The staff are professional, caring and warm, there is low staff turnover. A lot of well thought out activities. Staff are clearly passionate about their work and committed to improving through various courses and bringing the learning back into the nursery".

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 promote and support children's well-being, improvements should be made to the way in which staff record important information about children.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: '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 8 December 2022.

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Action taken since then

Improvements had been made to children's personal plans to make these more meaningful, working documents. Key persons were allocated protected time to facilitate more extensive assessments of children's wellbeing alongside parents. This helped build positive relationships and resulted in children settling into nursery more successfully. Moving forwards, the service was committed to ensuring information in relation to children's needs and support strategies is documented more explicitly. This would help to demonstrate how staff have used their knowledge of child development and skills to empower children to achieve.

This area for improvement has been met.

Previous area for improvement 2

To ensure that children's needs are met, the manager should ensure that staff have the appropriate skills and knowledge to care for individual children. Deployment of staff at differing times of the day should take this into consideration.

This is to ensure care and support is consistent with the Health and Social Care Standards which states, 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

This area for improvement was made on 8 December 2022.

Action taken since then

Staff communicated well with one another to ensure that children's wellbeing needs were met effectively.

Arrangements were in place to promote continuity of care across the day and ensure positive transitions and communication with families

Quality assurance systems, including staff practice observations, helped promote a culture of reflective practice within which staff developed their knowledge and skills to help improve outcomes for children.

This area for improvement has 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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very 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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