

# Eastern Primary Schools Out Day Care of Children

Eastern Primary School  
Camperdown Street  
Broughty Ferry  
Dundee  
DD5 3AE

Telephone: 07743 134 689

**Type of inspection:**  
Unannounced

**Completed on:**  
22 May 2024

**Service provided by:**  
Eastern Primary Schools Out Scottish  
Charitable Incorporated Organisation

**Service provider number:**  
SP2014012302

**Service no:**  
CS2014325907

## About the service

Eastern Primary Schools Out is an out of school service, registered to provide care to a maximum of 72 children of primary school age. During school term times, the service may care for children who attend morning sessions at Eastern Primary School Nursery, prior to the nursery session starting.

The manager is also the manager of the following service: CS2014324305 Forthill Out of School Club, Forthill Primary, Fintry Place, Broughty Ferry DD5 3BE.

The club operates from the dining hall within the school. Children also have access to the gym hall and direct access from the dining hall to a large playground. The service is close to shops, library and transport routes.

## About the inspection

This was an unannounced inspection which took place on Monday 20 May 2024 and Tuesday 21 May 2024 between 13:00 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 and one parent. We reviewed 20 MS Form responses and discussed this feedback with management;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

## Key messages

- Children were happy, settled and enjoying their time in the service.
- The staff team worked well together, which created a positive atmosphere where children felt safe and secure.
- Effective staff deployment ensured children were well supported and their individual needs met.
- Management and staff should continue to develop a robust quality assurance system to support the improvement agenda within the service.

## 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?	5 - Very 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 1:1 Nurturing care and support

Children were happy and settled in the club. They were relaxed around the staff and in the club environment. Staff knew children well and were kind and caring in their approach with them. This helped children feel safe and secure while in the service. A parent commented "Excellent service. My children are listened to, valued and are very much part of a wee community. I, too as a parent feel very supported and valued by all the staff team. They are all amazing practitioners who support all children's needs and respond to all individually".

Children had developed positive relationships with each other, chatting and playing happily together with their friends. For example, children were playing pool together and a group of children were using their imaginations when playing with the dolls. Children invited staff into their play when they wanted and asked for help if needed. Most staff interactions were good; however, some staff interactions were limited with the children. Management should support staff to develop their interaction skills.

There were opportunities throughout the session for children to be independent and make decisions. They freely chose what they wanted to play with from what was on offer indoors. Children told us that they could ask for resources they wanted that were not out in the hall and these would be brought from the storage cupboard. This showed children they were valued and their voices heard. Children also had the opportunity to play outdoors if they wished, engaging in a variety of activities and with a range of resources. Snack time also offered opportunities to be independent as children served themselves and poured their drinks.

Snack was an unhurried experience for the children where they chose what they wanted to eat, such as blueberry or apple bars and a selection of fruit. Staff sat with the children and a variety of conversations were had encouraging language, vocabulary, pondering and confidence.

Information was gathered for each child in their personal plan to help staff in caring for and supporting children's needs. Allergy and health needs were recorded and known to staff to ensure children were kept safe. We discussed the information gathered within the 'all about me' sheets and how these could be developed further with children to gather more detailed information. Management were aware of the personal plan guidance accessible on the Care Inspectorate Hub. Plans were reviewed every six months or sooner with parents to ensure the information was up to date and relevant for the children.

Medication was stored safely in the service and parental consents gained before medication was administered. Management and staff should ensure all information gathered is always recorded accurately within the medication forms to keep children safe when medication is administered. Management carried out audits termly to ensure medication was up to date and safely stored. We suggested another column could be added to the audit form to include completed paperwork. We discussed with management the use of suncream and the time taken for it to be applied when children went outdoors. This was an area they were discussing as a team to further develop.

Management and staff were fully aware of their responsibilities in keeping children safe and protected. Child protection training was carried out and discussions had as a team to ensure staff were confident in the

procedures to follow should any child protection concerns be identified.

### Quality Indicator 1.3 Play and learning

Children were fully engaged in play and learning during the inspection visits. They were enjoying their play and having fun, alone and with friends. There were opportunities for children to lead their own play in spontaneous activities indoors and outside, for example, using their imaginations as they played in the home area or with the dolls and pram. Two boys used the magnetic shapes to create a building, while a group of children had fun with arts and crafts indoors. Children had opportunities to make suggestions, plan activities and give feedback on the service. A child shared with us "Lots of fun things to do, like art". Management discussed the development and recording of planning and the recent introduction of a floorbook to record this and the children's voice.

Staff sat at children's eye level when playing and interacting with them. There was light heartedness between children and some staff as they played and talked. However, there were some missed opportunities for staff to extend children's play and learning and where discussions and chats could have taken place. Staff should be supported to develop their confidence in extending children's play and learning. While we observed staff responsiveness to children's wishes and interests by many of the staff team, further development of knowledge and skills would benefit staff in ensuring they were all responsive to the children when needed.

Children had opportunities to be involved in active play, outdoors and in the gym hall. There was ample space outdoors in the playground for the children to run around, have fun with a variety of resources and access fresh air. Children could have more resources if they wanted from the store. We observed children playing football and basketball and taking part in the climbing frame obstacle course. Some children made dens using loose parts, a tarpaulin, blankets and clamps. A small group of children made a house from crates, a cage for their wild animal (another child), using loose parts, whilst problem solving about how to make sure they did not escape. We discussed ratios and supervision outdoors with management to ensure all children were able to access play when they wanted.

## How good is our setting?

**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 2.2 Children experience high quality facilities

The club was safe and secure for children attending. Parents gained entry to the large hall through doors from the playground which were supervised by staff. This meant staff knew those to whom they were allowing access. The outdoor space was secured by locked gates, with staff monitoring the gate parents used to access the playground. Children had access to the large dining hall, the gym hall and playground.

Infection control measures were in place within the service, with children and staff handwashing when necessary. Tables were cleaned before and after being used for snack. Toys/ resources were washed or cleaned when needed and this also provided the opportunity to ensure they were still fit for purpose. Staff should ensure snack preparation areas and the fridge are kept clean and orderly to ensure the spread of infection is minimised.

Children had access to a variety of resources, which were of interest to them indoors and outside. Toys and resources were easily accessible to the children on table tops and within areas of the hall. Outdoors,

children could choose what they wanted to play with from the storage cupboard. The toys, resources and equipment were developmentally appropriate for the children attending the club, encouraging imagination, problem solving, co-operation and challenge on occasion. We observed there was no comfortable space for children to rest and relax after school. Staff should continue to review the environment and resources on offer, in consultation with children.

There were arrangements in place to monitor the safety of the setting, for example, staff carried out risk assessments before the children attended, to ensure hazards and risks were minimised. Written risk assessments were in place to support staff in risk assessing all areas of the service. These risk assessments were reviewed annually or sooner if needed, to ensure they remained up to date.

## How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 3.1 Quality assurance and improvement are well led

The service aims, objectives, vision and values were in place and gave a clear direction for the service. Children had been involved in creating the vision and values of the setting.

A quality assurance calendar informed the Improvement Plan along with feedback from children and families. The Improvement Plan identified priorities to support the improvement of the club and the development of staff practice and skills. We discussed ensuring evaluation and reflections were recorded as priorities were progressed and actioned.

Whilst some monitoring and auditing had been carried out by management, this was at an early stage and needed further development to ensure effective evaluation of the service. The staff team should develop their knowledge and understanding of evaluation tools, such as 'A quality framework for daycare of children, childminding and school aged childcare' to provide benchmarks to support the monitoring and assessing of the service. All areas of the service should be evaluated, assessed and reflected upon to support improvement and high-quality outcomes for children. Robust quality assurance systems should be developed to support improvements and to establish a culture of evaluation and reflection. The service should continue to gather feedback from parents and children regularly to ensure their voices are heard and included to support improvements. We signposted the management team to the ELC Improvement Section on the Care Inspectorate Hub. **(See area for Improvement 1).**

Parents confirmed that they received regular communication from the club, in a variety of ways including email, newsletters and face to face at collection times. These communication methods ensured parents were included and informed about the service regularly. Positive relationships were observed between staff and parents as the friendly staff greeted parents and shared information about activities the children had been involved in during the sessions.

A parent commented "The dedication and warmth of the staff make this after-school club a nurturing and positive place for children to be after school hours".

Policies and procedures were in place to underpin the service and support staff practice. These were reviewed regularly to ensure they were up to date, following current best practice and relevant to the service. We asked that policies be reviewed to ensure they contained reference to appropriate guidance.

## Areas for improvement

1. To improve staff practice and outcomes for children, management and staff should formally and effectively evaluate all areas of the service and develop a continuous quality assurance system to support the development of the service.

**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

There was a mix of experience, knowledge and skills within the staff team. The staff worked and communicated respectfully with each other. They talked of supporting each other and being supported by management. We saw that staff worked well together as a team and effective communication between them ensured that there was no impact on children's care or play when staff were required to leave the hall or areas during the sessions. A parent said "The staff are friendly. I feel comfortable talking to them about a range of topics. I feel like they genuinely care for my children and all the children. They are approachable. They appear to work well as a team. Their communication is clear".

The service was appropriately staffed and staff suitably deployed throughout the sessions to meet children's needs. Staff positioned themselves appropriately for maximum supervision indoors and outside without impacting children's experiences.

Staff were committed to professional development and had undertaken a variety of training to enhance their knowledge, skills and practice. Staff were safely recruited when offered employment and all necessary checks and references undertaken before staff started their post. Induction processes were conducted to support staff in gaining an understanding of their roles and responsibilities.

Management conducted supervision and appraisal meetings regularly to ensure that staff had opportunities throughout the year to discuss their practice, skills, strengths and areas to be developed. The manager talked about undertaking training to support appraisals and intended changing the way these meetings were carried out, to be more beneficial to staff members and management.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very 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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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