

Kinloss Crafty Cool Kids' Club Day Care of Children

Kinloss School Lodge
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Type of inspection:
Unannounced

Completed on:
2 May 2024

Service provided by:
Kinloss Crafty Cool Kid's Club

Service provider number:
SP2003001922

Service no:
CS2003008915

About the service

Kinloss Crafty Cool Kids' Club is registered to provide a care service to a maximum of 20 primary school aged children. The service operates from a building in the grounds of Kinloss Primary School and has its own enclosed, secure garden. The service can also use the school playing field. The service is provided by a committee of volunteers. At the time of the inspection the service operated during term time, in-service days and part of the holidays.

About the inspection

This was an unannounced inspection which took place on 1 May between 15:00 and 18:00, and 2 May 2024 between 08:30 and 09:00, and 15:00 and 16:00. The inspection was carried out by one inspector 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:

- Observed practice and daily experiences
- Spoke with staff and management
- Reviewed documents
- Spoke with children using the service and gathered the views of twelve of their family members.

Key messages

- Children experienced warm, kind, and nurturing interactions and had formed positive relationships with staff.
- Children were engaged and having fun across a variety of play experiences.
- Regular access to the outdoor area benefitted children's health and wellbeing.
- Parents told us they were well informed about their child's time in the service.
- Self-evaluation and quality assurance processes should be developed, to support the continuous improvement of the service.
- The leadership and staff team were committed to improving outcomes for children through holistic family support.

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?	3 - Adequate
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 key question as good where several strengths impacted positively on outcomes for children/people and clearly outweighed areas for improvement.

1.1 Nurturing care and support

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

Children were engaged and having fun as they played indoors and outdoors. They benefitted from strong, positive relationships with staff who knew them and their families well. Children's wellbeing was promoted by these relationships and effective verbal communication which supported information sharing. Children were confident when engaged in ongoing conversations with staff. This gave children the opportunity to express their views and opinions and supported them to feel valued and listened to. Staff responded to non-verbal cues from children and as a result they were able to offer them appropriate care, such as reassurance or gentle reminders to rest. This supported children's overall wellbeing. Parents strongly agreed that children were well cared for. One parent told us, "Such a loving and caring place, welcoming to all children." Another parent shared with us, "Staff are friendly and great with the children."

Personal plans were in place and held a range of useful information including personal care information and children's views on likes and dislikes. Plans had not been reviewed since the information was gathered at the start of the school year. We advised that they should be reviewed with parents at least every six months or when there was a significant change to the information. The review process should also actively engage children wherever possible, and we signposted the service to guidance on this. The manager agreed to ensure that reviews and updates were recorded moving forward.

Where medication was needed, permission had been sought by the service to administer it. The manager understood the information that required to be gathered and held alongside the medication and had kept records of its administration. This helped to support children's health. Good practice is that medication is reviewed every three months, and the manager agreed to review the documentation procedure in place to support this. We refer to this further under key question 3.1 where we made an area for improvement around quality assurance procedures. These actions will ensure that children's health needs are consistently met.

Snack time was a sociable and relaxed experience for the children who sat together with staff and shared news of their day. Children told us that there was usually fruit on offer and sometimes crackers or bagels. Children would benefit from more involvement in choosing, preparing and serving snack, which would further promote life skills and independence. Additionally, they should have access to water independently during the session. This would help to ensure they remain hydrated.

Staff were knowledgeable about factors which may impact on the children's health and wellbeing. They shared information on children's experiences and their general mood with parents when they were picked up. This supported information being shared on days when children may need a little more support. This supported a continuity of care for children. The manager, staff and parents shared with us many examples of the way in which they had supported the children and each other through the recent loss of a colleague. This illustrated how the nurturing ethos of the service ensured that children and families were well

supported, through strong connections and a holistic, caring approach to everyone's wellbeing. One parent told us, "KCCCKC and more importantly the manager of the setting thoroughly deserves recognition for the exemplary service provided to local families. A warm, safe, welcoming space where children are able to develop and thrive; experiencing love, care, and community."

1.3 Play and learning

Children were leading their own play, choosing from different themed rooms inside and the large, enclosed garden. They could freely choose where they wanted to play and what they wanted to play with. For example, both ends of the garden space were being used for imaginative play. Using cherry blossom to make "tea" as it fell from the overhanging tree, children ran restaurants and cafes. They took orders and gave change. Staff made good use of opportunities to extend understanding and vocabulary, when invited to join in, through conversations and role play with the children. Indoors, staff were responsive to requests for quiet one to one time or resources for craft and drawing. As a result, children were supported to lead their own learning.

Opportunities for literacy and numeracy learning were woven across experiences. Children had been involved in writing and drawing posters of club rules and these were displayed throughout the indoor rooms. Some children had continued the theme to the playhouse outdoors, which was being used for role play as a school classroom. Children practiced their fine motor skills and creativity at the craft table as they made masks and bead patterns. A quiet room provided space for reading and resting, and parents told us that homework stations were available for those children who wanted to carry on with school work. As a result, children were engaged and learning.

Children were consulted about the activities they wanted to participate in at the club, by completing mindmaps at the start of each school year. Some planned activities took place throughout the year, such as football coaching. Staff were also aware of children's views during the session and this sometimes led to activities being adapted or put aside. Consulting with children more regularly on the experiences and resources on offer would extend their involvement and ownership of the service. This would be particularly beneficial for younger children and those who were more reluctant to share their views. While the opportunities for children's activities was broad, older children would benefit from activities that reflected their current interests and offered challenge. This would ensure that all children experience a service that is inclusive of their needs.

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.

Children experienced a welcoming and safe environment where they could have fun with their friends. They had ample space to move freely throughout the building and garden. The building had been refurbished to suit the service and contained three rooms, two of which were used for snack and play, and one was intended for quieter times. The quiet room provided a sofa and floor space which was homely and comfortable. These spaces were used for reading or for when the children wanted some quiet time. It could also be darkened for use when children needed rest. One parent described the setting as, "A lovely building full of comfort and fun." Another parent commented, "Children are encouraged to play outside, but are also free to make choices over their preferred activities, giving them more autonomy and responsibility than is available to them during a typical school day." We agreed that this approach benefited children's health and wellbeing.

Children's interests were reflected in the resources available in each room, and included board games, craft materials and construction toys. Children's choice was supported as resources were clearly labelled and could be independently accessed. Children had places to store their belongings in the central room, which meant they remained easily accessible. This meant that children had access to spaces and resources which met their needs and interests. Parents strongly agreed that the setting provided their children with a very good range of resources and spaces. One parent commented, "The setting has always been observed to be creative and resourceful, teaching children the value of pre-loved, homemade, dual purpose and recyclable objects and resources. Junk modelling, crafting, planting and painting are among the activities that my children embrace the most at the setting, along with team games and sports."

The outside space was accessed through the main door and was large, secured area. It contained a very good variety of well thought out play spaces including a house, a decking area, a tyre swing and various wooden storage sheds and play structures. The sheds contained a wide range of outdoor toys including scooters, hoops and balls. This gave the children opportunities for energetic, physical play which benefited their wellbeing. In addition, children were welcome to take resources from indoors to the garden. Some staff and parents shared with us that they would like to see the grass restored across much of the garden, as it had worn away. We agreed that this would enhance the garden space and suggested that involving children, families and staff in plans to develop this area would be beneficial.

Children's safety was maintained as staff were deployed appropriately. At least one member of staff was outside at all times, and at pick up times, staff positioned themselves near the side gate through which parents entered the setting. This ensured that staff knew when visitors were approaching and could ensure that children stayed within the setting when the gate was opened. Detailed risk assessments were in place for spaces and activities, for example for the building and garden, for children being involved in food preparation, and for collecting children from school. We observed staff prompting the children to have an awareness of their own risk and that of others when outside, such as checking for open gates and safe use of the tyre swing. This ensured that children's safety was maintained and that children developed a sense of responsibility to themselves and others.

Children's health was further supported by the infection prevention and control measures which were in place. Staff supported children to be aware of the need for good personal hygiene routines through gentle reminders and discussion. Children were familiar with routines for effective handwashing. This helped to ensure that the potential for spread of infection was minimised. Staff had undertaken training and appropriate cleaning schedules were in place. We signposted the service to updated guidance on infection prevention and control for out of school care services, to ensure that the service complies with current good practice.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate where strengths just outweighed areas for improvement.

The manager and staff team were committed to providing quality experiences for the children and were responsive to informal feedback from children and their families. The manager was aware of areas of quality assurance and improvement that needed review and further development. We acknowledged that the capacity of the service to address this had been impacted by the recent loss of a colleague. The manager and staff had focused on supporting the children, families and each other through this time. Parents and staff told us that they felt very well supported by the manager, who had felt well supported by the committee throughout.

The service was undergoing further changes, as the manager was preparing to leave their post. A new manager had been appointed and a handover period was underway. Children and families had been kept well informed of the changes and again, parents expressed gratitude for this approach. This helped to ensure continuity of care and support to everyone attending the service while the service underwent a further transition.

Whilst the committee, manager and staff had worked through a number of operational changes, an improvement plan was not in place to reflect this. Developing a plan with clear actions and outcomes would support the progression of planned changes, for example improving the grassed area in the garden, or involving children more consistently in snack preparation. Similarly, staff regularly considered what was going well in terms of children's activities, but there was no formal system of self-evaluation in place. This meant that opportunities were missed for the team to identify inconsistencies or gaps in record keeping, or to consider changes to practice in the light of new good practice guidance. This meant children were not benefitting from improvement which was planned, reviewed, and evaluated to promote a consistent quality of care.

We advised the service to implement quality assurance procedures to address this (**see area for improvement 1**). Developing a process of monitoring and audits would support the manager and provider in identifying areas where improvement was needed. For example, monitoring of personal plan reviews and medication documentation, as outlined in key question 1.1, would ensure that children's health and wellbeing needs were consistently met.

We discussed with the managers how both self-evaluation and quality assurance should take account of children and parents' views. These would feed into an improvement plan with clear actions, success criteria and timescales. This would provide the opportunity for promoting a shared vision for the service, and promote a culture of continuous improvement. We signposted the managers to online training resources on the Care Inspectorate Hub, and recently published good practice guidance on family engagement to help with this. The current manager took immediate steps to update policies for personal care and administration of medication, in line with good practice guidance.

Areas for improvement

1. To support children's wellbeing and promote the continued development and improvement of the service, the manager should ensure robust quality assurance systems are in place.

This should include but is not limited to:

- a) Regular self-evaluation which involves parents and children.
- b) A system for monitoring and auditing staff practice; all children's information, including medication information; all other record keeping and service processes.
- c) Clear and effective plans to maintain and improve 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.

Staff were warm and responsive in their approach. They treated each other with respect and courtesy which promoted a happy and relaxed atmosphere for children. They demonstrated that they knew the children well and had a good understanding of their individual needs and interests. This allowed them to offer individualised support and care, and as a result children's needs were being met. Parents agreed that the staff team offered holistic care for their children, with one commenting, "Staff are dedicated and appear empowered and fulfilled in their roles at KCCCKC."

When the staff team had undergone changes, the manager had ensured that children and families were kept well informed of the changes and had successfully employed regular relief staff who were well known to the service. The committee had supported an effective handover between managers which had provided further stability for the service. This provided a continuity of care for children and families. Parents strongly agreed that leadership of the staff team was a strength of the service. One parent told us, "The manager's leadership, enthusiasm and dedication to families are well modelled by staff that have been carefully selected and upskilled to support the diverse needs of the school community."

Staff communicated well with each other when leaving spaces, which ensured that children's safety was maintained. They were flexible in their approach to follow children's interests and requests in play, swapping roles and areas in order support this. This meant that children were well supervised.

Children benefitted from staff who were motivated to provide positive outcomes for children. One member of staff told us, "As a staff team we all strive to work together, building those relationships and strive to maintain the values and ethos of the club whilst keeping the best interests of the children as our main focus." They had completed a range of online courses and spoke positively about their training experiences and knowledge gained. One of the staff members had recently achieved a national qualification, and spoke about how this would support them to undertake management activities to benefit the service. Some staff members had benefited from training and experience in their other voluntary work and were supported to transfer their skills into the service. They were confident to call upon each other to ensure effective supervision and quality engagement with the children across the day.

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

The manager and staff should undertake refresher training in child protection to ensure that they have sound knowledge and an appropriate understanding of safeguarding children.

National Care Standards, Early Education and Childcare up to the age of 16: Standard 3 - Health and wellbeing.

This area for improvement was made on 17 August 2017.

Action taken since then

All permanent staff had undertaken training on child protection, and training was scheduled for new members of staff.

This area for improvement has been met.

Previous area for improvement 2

The management committee and manager continue to involve the children and parents/carers in the evaluation of the service, acting upon suggestions with a view to improvement.

National Care Standards, Early Education and Childcare up to the age of 16: Standard 13 - Improving the service and Standard 14 - Well managed service.

This area for improvement was made on 17 August 2017.

Action taken since then

Children and parents/carers had been consulted about some changes to the service, for example through the use of mindmaps and questionnaires. To fully involve children and families in development of the service, self-evaluation and quality assurance processes should be developed so that improvements can be identified and planned for.

This area for improvement has been partially met, and will be superseded by a new area for improvement under key question 3.1.

Previous area for improvement 3

The management committee should ensure that relief workers not registered with the Scottish Social Services Council (SSSC) at the time of their appointment are registered within six months, and should not be employed in such roles until they are registered should the six month period be exceeded.

National Care Standards, Early Education and Childcare up to the age of 16: Standard 12 - Confidence in staff.

This area for improvement was made on 17 August 2017.

Action taken since then

All staff were registered with the Scottish Social Services Council (SSSC) and service policies and procedures reflect this requirement.

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?	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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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