

The Bees Knees Nursery Day Care of Children

280 Lanark Road West
Currie
EH14 5RU

Telephone: 07770 060 373

Type of inspection:
Unannounced

Completed on:
3 May 2024

Service provided by:
The Bees Knees Playgroup Ltd

Service provider number:
SP2015012460

Service no:
CS2015336137

About the service

The Bees Knees Nursery is an early learning and childcare setting situated within a community building in a residential area of Currie, close to transport links, shops and community services. The setting provides day care for up to 19 children aged from birth to entry to primary school age. The provider of the setting is the registered manager and responsible for the day to day running of the service.

The setting comprises of two playrooms, one for children under the age of two years and another for children aged over two years. Children over the age of two have direct access to the outdoor play space.

About the inspection

This was an unannounced inspection which took place on 02 May 2024 between 09:30 and 17:15. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for this inspection we reviewed information about the service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluations we:

- spoke with and observed children using the service
- received written feedback from six families and spoke with three parents
- spoke with staff and received written feedback from three staff members
- spoke with the provider/manager
- observed practice and children's routines and experiences
- reviewed documents.

Key messages

- The service recognised the importance and valued the contribution of families.
- Interactions should continue to improve to enhance children's care, play and learning experiences, whilst contributing to their overall wellbeing.
- Mealtimes were a calm, relaxed and unhurried experience.
- The service required more time to fully embed an effective child centred planning cycle.
- Staff should further develop rich, inviting play spaces that promote curiosity and reflect children's current interests.
- The manager should further develop the quality assurance system.
- Staff were kind and caring to children and had clearly built up strong relationship with children and families.
- The manager should continue to develop and strengthen a tailored training programme which supports staff to develop their skills and address any possible gaps in their practice.

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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

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 only just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

Interactions between staff and children were variable. Parents told us, "The staff are lovely, open people who seem to care deeply about the children" and "The staff are always welcoming and are very involved with my child's care". While we recognise that we saw some positive interactions on the day of the inspection, these were not consistent. For example, at times some staff appeared disengaged and their closed body language did not always create opportunities for quality interactions. Moving forward, the manager should support staff to revisit and further develop their knowledge and skills in relation to the importance of quality interactions with children. This would enhance children's care, play and learning experiences, whilst contributing to their overall wellbeing (**see area for improvement 1**).

Staff worked in partnership with families and valued their contributions to ensure they were meeting children's needs and wishes through sensitive, responsive daily routines. One parent told us, "Staff are happy to discuss my child's day at pick up time. They are always pleasant and I feel I can discuss any aspects of my child's care with them". Nurturing sleep routines recognised the importance of comfort objects and reflected children's preference as to how they were supported to sleep. For example, some children were comforted through cuddles and soft songs being sang, some children had special comfort items from home and other children chose to have a story as they drifted off to sleep. This contributed to the positive relationships that had been built and supported children and families to feel valued.

Personal plans were in place to support children's care, play and learning. The service reviewed these as and when changes occurred or as a minimum every six months in line with legislation. The service had introduced various documents to record children's next steps and support children's overall development. Some staff were unable to confidently talk about children's next steps and how these were being supported. Where support strategies were detailed in personal plans, these were not consistently being implemented and were not being effectively monitored and evaluated. The service should continue to improve children's personal plans to ensure these are meaningful working documents. This would contribute to children experiencing consistent approaches from staff that are confident in their practice.

Mealtimes were a calm, relaxed and unhurried experience. Seasonal menus reflected good practice guidance, meals were prepared on site and adapted to offer children a variety of choices. For example, children were offered and encouraged to try different home-made pasta dishes, as the cook chatted to them about the different ingredients. As a result, children confidently tried a variety of different foods, discovering new tastes and preferences. Younger children were encouraged to self feed as staff sat with them and offered praise and encouragement. Older children were able to self serve, developing their independence and confidence. There were some inconsistencies with the interactions at lunchtime, with some staff not making the most of the opportunities presented during this rich routine. Moving forward, the service should ensure that all staff recognise the importance of quality interactions and their role in modelling these (**see area for improvement 1**).

Quality Indicator 1.3: Play and learning

The service recognised the importance and valued the contribution of families. Daily conversations supported ongoing communication about children's care, play and learning. One parent shared with us, "They are great with providing information and communicating with me whether it's through chatting with me during drop of/pick up or through email". A variety of other methods were used to involve families in their child's learning, such as a private social media group, focus weeks, parents evenings and regular progress reports. This contributed to families feeling valued and involved them in their child's care, play and learning.

The service had begun to implement a new planning process to support children's play and learning. 'In the moment' planning was new to staff and they shared that they were still becoming familiar with this process. Some staff could talk about the planning process and children's current interests. However, this was not consistent across the whole team. The service required more time to fully embed an effective child centred planning cycle. This would ensure that children's individual interests were being recognised and their learning extended.

The staff team had recognised that further use of the local community would enhance children's play and learning experiences. This is an area of practice the service was currently developing. The manager was supporting staff to develop their confidence in relation to identifying and extending children's learning whilst out in the local community. The service should continue with their plans to further develop this key area of practice. This would offer children new experiences as they become familiar with the local community and their surroundings.

Areas for improvement

1.
To support children to experience consistent, nurturing interactions, the manager should support the staff team to revisit the importance of quality interactions. Staff should be supported to enhance their skills and knowledge in how young children play, learn and develop. Children should be empowered to be fully involved in their play and learning through the skilled interactions and actions of staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child or young person I feel valued, loved and secure' (HSCS 3.10).

How good is our setting?

3 - Adequate

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

Quality Indicator 2.2: Children experience high quality facilities

The environment was clean, bright and well ventilated. Staff had begun to reflect on and develop children's play spaces. However, these could be further developed to ensure they reflect children's current interests, promote curiosity and new learning opportunities. Some play spaces felt tired and uninviting. For example, the outdoor summer house offered shelter from the weather but lacked attention to detail and resources. This space would benefit from further development. Resources did not always offer challenge, or reflect children's current interests. Some staff could not confidently talk about how they had developed the environment to reflect children's current interests or support their development. As a result, we observed periods of time where children wandered around aimlessly and appeared bored within the space. Staff should further develop rich, inviting play spaces that promote curiosity and reflect children's current interests. The manager was receptive to this feedback. This would support children to feel heard and enable them to influence their environment (**see area for improvement 1**).

Nappy changing facilities were clean, well organised and children's personal items were stored in line with good practice. Staff ensured that children's privacy and dignity was respected whilst they received personal care. The manager had introduced regular health and safety checks and any action taken was recorded. Children within the 2-5 year old playroom were encouraged to wash their hands, whilst younger children were supported by staff to wash their hands with face cloths. However, within the baby room there were some capable, confident infants that could have been supported to wash their hands with soap and water. Staff should ensure they are recognising the capabilities of the individual child and not having a one size fits all approach across the playroom. This would promote independence, begin to develop the importance of good hand washing and strengthen infection prevention control practices.

Children within the 2-5 year old playroom had direct access to the garden and were freely moving between indoors and outdoors. However, due to the staffing levels children did not always have access to the main garden, and at times could only access the smaller summer house garden area. We report on this in 'Key Question 4: How good is our staff team?'. Children within the baby room did not have direct access to outdoors, however, were supported to visit the garden space at various points throughout the day. Further development of the environment would promote babies and infant participation. For example, the service could consider moving younger children's coat pegs to a low height, to support children to collect these when they wish to go outside. This would support children to communicate in the space, have their voices heard and further influence their own play and learning. To support the service to develop in this area, we directed them to the Scottish Government good practice guidance 'The Voice of Infant: best practice guidelines and infant pledge' (2023).

Areas for improvement

1. To support children's play and learning, the provider should ensure that they have consistent access to a range of well presented and well maintained play spaces and resources. This would support children to experience an environment that is welcoming, inspiring and engaging whilst delivering the message that they matter.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27) and, 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.21).

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 manager had begun to develop quality assurance systems to address gaps in practice that were identified at our previous inspection. For example, a health and safety monitoring system was now in place. This was a positive starting point. Moving forward, the manager should further develop the quality assurance system to include all key areas of practice, such as the quality of children's play spaces, experiences and interactions. An improvement plan was in place, this had been developed in partnership with the staff team. However, staff could not confidently talk about improvements or identify clear outcomes they were currently working towards. This showed a disconnect in this process. Staff should be supported to further develop their understanding of their role in promoting a culture of continuous improvement, this should be informed by good practice guidance. This would contribute to positive outcomes for all (**see area for improvement 1**).

The culture of self-evaluation for improvement was at an early stage of development and required further development. Whilst it was positive that staff had room meetings, the staff team did not meet as a whole team. This limited the opportunities for staff to come together and have meaningful reflective discussions. Self-evaluation is a core part of assuring quality and supporting improvement. Moving forward, the manager should develop further opportunities to support staff to participate in ongoing self-evaluation and reflective discussions. The manager recognised that this was an area of practice that required further development. This would promote a culture of continuous improvement and enhance children's care, play and learning experiences (**see area for improvement 1**).

Areas for improvement

1. To ensure children benefit from a high quality service, the manager and staff team should continue to further develop an effective quality assurance system. This should include ongoing self-evaluation and opportunities for staff to reflect together, this should be supported by best practice guidance and current research. This information should be used to influence positive change to outcomes for children and families.

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?

3 - Adequate

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

Quality Indicator 4.3: Staff deployment

Staff were kind and caring to children and had clearly built-up strong relationship with children and families. Parents told us, "Small, homely feel, staff know children well and children have formed strong bonds with the staff" and "The staff are lovely, open people who seem to care deeply about the children". This supported children to feel comfortable and confident.

The service had the minimum staffing levels, which meant on the day of inspection the manager was working directly within the playrooms. Staff worked well together and communicated with one another across the two playrooms. However, the staffing levels meant at times covering staff absences was challenging and had potential to have a direct impact on children's experiences. One staff member told us, "When staff members are on holiday or off sick it can sometimes have an impact". The service should ensure systems to support the management of staffing. When unplanned absences occur, these should be effectively managed to support minimum disruption to children's routines.

Staff skills, knowledge and experience varied across the team. Staff accessed training through a digital platform. Staff were encouraged to reflect on their learning on completion of any new training. However, whilst a variety of training courses had been completed, there were still gaps in some staff skills, knowledge and understanding. When parents were asked, 'What would make the service better?', one parent told us, "More experienced and fully qualified staff". Support and supervision take place regularly and staff are fully involved in this process. This supported staff to participate in reflective discussions. However, further work was required to ensure that these discussions were influencing and improving staff practice. The manager should continue to develop and strengthen a tailored training programme which supports staff to develop their skills and address any possible gaps in their practice. This would contribute to positive outcomes for all (**see area for improvement 1**).

Areas for improvement

1.

To support children's health and wellbeing, they should be cared for by staff that have the correct skills, knowledge and experience to meet their individual needs. The manager should ensure that professional learning is well planned, reviewed and matched to identified needs and possible gaps in staff practice. An effective evaluation system should ensure that training and development opportunities lead to improved outcomes for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

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

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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