

# St John's Out of School Club Day Care of Children

St. Johns Primary School  
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Rosyth  
Dunfermline  
KY11 2BT

Telephone: 07515 189 481

**Type of inspection:**  
Unannounced

**Completed on:**  
23 May 2024

**Service provided by:**  
Fife Council

**Service provider number:**  
SP2004005267

**Service no:**  
CS2003006998

## About the service

St John's Out of School Club is registered to provide a daycare of children service to a maximum of 16 children who are primary school age to 14 years. The service operates from St John's primary school in Rosyth. They are close to green spaces, local amenities and can be reached by transport links. Children have access to a playroom, kitchen, gym hall, toilet facilities and outdoor spaces.

## About the inspection

This was an unannounced inspection which took place on Thursday 23 May 2024 between 14:45 and 18:30. 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:

- Spoke with nine children using the service and three families. We received feedback from four families via an electronic link
- spoke with three staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- Children had built positive attachments with staff who knew their needs and preferences.
- Children had opportunities to lead their play and learning.
- Children were being supported to develop independence in preparing foods at mealtimes.
- The service should develop their snack routine to offer children more choice in when to eat, this would minimise disruption to play.
- The service should ensure daily checks of spaces are effective at identifying and managing potential risks.
- Effective hand hygiene routines should be supported to ensure they are following guidance.

## 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?	4 - Good
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 quality indicator as adequate, where strengths only just outweighed weaknesses

### Quality indicator 1.1: Nurturing care and support

Children had developed trusting relationships with staff who knew their individual needs and wishes. Families told us children enjoyed their time in the club and were happy to attend. Staff were calm and nurturing in their interactions and respected children's choices most of the time during our visit. Children were being supported to understand their rights as staff documented these in the floor books. We encouraged staff to look at how this could be further developed in practice and daily interactions.

Children were supported to develop skills for life through the mealtime routines. They were able to help prepare foods. One family told us "My daughter has had the opportunity to help prepare snack which she loves!" The service should develop this routine further to offer all children choice in when they eat, ensuring a free flow snack routine that does not disrupt play (see area for improvement 1.)

Children were able to rest and relax in a small space off the playroom. They had access to large floor cushions, blankets, props, and resources. This meant that they could choose to spend time in a quiet space with friends or alone to support their wellbeing.

Personal plans were in place and registration information had been reviewed. We suggested the service ensure they use their all about me updates with children to record what is important to the child.

Families were involved in the setting. They were welcomed in at drop off and pick up times, spent time talking with staff about their child's day and received regular newsletters. Noticeboards were kept up to date with important information. Families told us communication was great and staff took time to talk with them. As a result, they felt included in their child's play and learning in the setting.

The service had a system in place for the safe management and administration of medication. Staff were clear about their roles and responsibilities to support children who required medication. As a result, children's health care needs were being met.

We evaluated this quality indicator as good, where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

### Quality indicator 1.3: Play and learning

Planning for play and learning experiences was informal. Children were asked daily what they would like to do, and staff responded to their requests. Children were able to lead their play and learning most of the time in the service. They made independent choices from a selection of resources. Staff had a good understanding of children's preferences and ensured there were materials available that supported them to engage in creative activities. For example, some children had an interest in making planes and staff supported this. Families commented ""My daughter has been involved in all types of arts and crafts. She has made several projects that she has brought home, for example, a robot." and "There is also lots of imaginary play, where the kids have set up vaccination centres and played at cooking meals and other things."

Children benefitted from quality interactions from staff that supported them to lead their play for most of the session. Staff spent time playing games with them and helping them create their ideas. We asked children what they enjoyed about the club. They said "I like everything. Gary and Nicola are great, they are kind and helpful, "Playing outside and with toys and games" and "Garry and Nicola are fun and do lots of things with us." As a result, children were happy, had fun and enjoyed their time in the club.

Children had access to the school playground and large playing fields. The service had recently benefitted from a shed to support outdoor play. This included loose parts resources that children worked with their peers to create their ideas. For example, they made a shelter under the trees from a piece of material and engaged in imaginative play. Children told us they liked using the loose parts. We encouraged the service to continue to develop this play as it offers children challenge, risk benefit play and problem-solving experiences.

The service had developed their use of floor books after completing training on the importance of consultation with children. These documented the varied learning and fun experiences children had taken part in. There was evidence of children's creations, what they said and writing about the experiences they had enjoyed. This showed the fun they had and evidence of consultation.

### Areas for improvement

1. To ensure children have choice and their rights respected, the service should further develop their mealtime routine. This should include, but not limited to; children having more ownership of when they would like to eat, being able to continue their play and enjoy eating in smaller groups with peers.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: 'I am empowered and enabled to be as independent and as in control of my life as I want and can be' (HSCS 2.2)

### 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

Children had access to a small, designated room, kitchen, outdoor space, and gym hall during arranged times. The playroom had a large table that was used for most activities including the snack routine. This meant that children had limited space to play on the floor. We encouraged the service to look at how the room could be organised to offer children more space and choice in where to play. For example, creating smaller areas with resources that are cosier and using smaller tables.

Staff carried out daily checks of the area's children accessed. They recorded this each session to indicate areas had been checked and were safe. We found these were not effective at identifying or removing potential risks. We encouraged the service to review their procedures for the safe management of risk and the role of staff in ensuring the safety and wellbeing of children (see area for improvement 1.)

Children were encouraged to wash their hands when entering the service after school. We found this routine could be further promoted at other times throughout the session. Children should be encouraged to wash their hands when entering the club after playing outdoors and after digging in the garden (see area for improvement 2.)

## Areas for improvement

1. To promote children's safety and wellbeing the service should review their daily procedures with staff for identifying and managing potential risks. These should be effective, meaningful and understood for the daily operation of the service. This should include, but not limited to, evidencing the clear actions staff have taken when risks have been identified.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: 'I experience an environment that is well looked after with clean, tidy, and well-maintained premises, furnishings, and equipment' (HSCS:5.24)

2. To ensure children's health and wellbeing is supported as part of their daily routine, the service should ensure hand hygiene is effective and embedded at key times throughout the session. This should include but not limited to reviewing infection, prevention and control guidance with staff and children where possible and ensuring children and staff wash their hands after being outdoors.

This is to ensure that care and support is consistent with the Health and Social Care Standards which: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS: 4.11)

## 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 improvements and led well

The service aimed to provide high quality childcare that was accessible to families that promoted a happy, caring, and secure environment for children. Families told us they were happy with the service provided and felt children were safe, had fun and enjoyed their time in the club.

Staff developed positive partnerships with children and families. They took time each day to talk with parents and knew what was important to each child. Families commented "Staff know you by name, welcoming and informative of what's happening in the club" and "Nothing is ever too much trouble for Gary and Nicola. They always take the time to talk to the parents." This meant they were able to support children's individual needs and wishes as positive connections had been made with families.

The service was asked at the last visit to involve children and families in the life of the service to support improvements. Families had been consulted using a variety of methods. For example, staff had a focus question that they asked families to give feedback on. They used the feedback to make suggested changes. This meant families were involved in developing the service. Evidence of consultation with children was documented in the floor books. We suggested staff use what children have said to support their development plan priorities.

A system was in place to support quality assurance. This included engaging with self-evaluation for improvement. We recognised this was at the early stages and encouraged them to continue with this to include the whole team. This would ensure staff were confident in the systems used during inspection visits and support them to have a greater understanding on how self evaluation impacts positively on outcomes for children.

## 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

Children benefitted from a small staff team. Staff worked well together, valuing each other's skills and experience. They had fun with children and knew what was important to them. One family commented "Gary and Nicola make so much time for the kids and it's so obvious how well they know each individual child." This meant children thrived and flourished as staff knew their individual preferences.

The manager visited the service regularly and spent time engaging with children at their interests. Children knew who they were and felt comfortable engaging with them. One family told us "The service is managed so well and there are a nice number of kids, it's not too full." As a result, children's needs were being met.

Communication in the team was effective most of the time in ensuring they were able to meet children's needs and offer a breadth of experiences. Staff deployed themselves to ensure children were supervised. For example, if children wanted to play outdoors, staff supported this interest. To ensure communication is effective, we suggested they look at a system so staff can communicate when they are supporting children in other areas. This would ensure children's play is not disrupted.

Children experienced care and support from the team who had engaged in continuous professional development. This included training on the benefits of consultation with children, loose parts play and child protection. Staff were able to reflect on some learning from training and how this had influenced change in the setting.

The service had a programme in place that supported new members of staff. Staff told us they spent time with the manager, were supported by the club senior and felt welcomed. This meant they had important information that supported them to carry out their role in meeting children's needs.

## 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 club should regularly evaluate the service offered as part of their self evaluation process. This should include consultation with staff, children and parents. This will help identify any areas for improvement and support the service to create their development plan to enhance outcomes for children.

This is to ensure confidence in the people who support and care for me and is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance processes. (HSCS 4.19)

**This area for improvement was made on 17 April 2023.**

#### Action taken since then

The service were engaging in a cycle of self evaluation to support continued improvement. This included consultation with children and families. Evidence of this was documented in the floor books and staff were able to talk about the changes they had made from consultation with families. We were confident progress had been made and this area for improvement had 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](http://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	4 - Good
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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