

Burgh Out of School Club Day Care of Children

Burgh Primary School Gala Park Galashiels TD1 1EZ

Telephone: 07724859041

Type of inspection:

Unannounced

Completed on:

5 June 2024

Service provided by:

Burgh Out of School Club Committee

Service provider number:

SP2003003344

Service no:

CS2003014370



Inspection report

About the service

Burgh Out of School Club provides an after school care service and is registered to provide a care service to a maximum of 22 children between the age of 4 years and 14 years, with a maximum of 2 children aged between 12 and 14 years.

Burgh Out of School Club is situated within Burgh Primary School. The service operates from a designated classroom and gym/dining hall. Children have access to outdoor play areas and toilets. The service is close to the town centre and other local amenities. The club is run by a voluntary committee of parents.

About the inspection

This was an unannounced inspection which took place on Tuesday 28 May 2024 between 15:15 and 17:15 and on Wednesday 29 May 2024 between the hours of 15:00 and 17:00. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with six people using the service and we received written feedback from seven parents.
- Spoke with the manager and one member of staff.
- Observed practice and daily routines.
- · Reviewed documents.

Key messages

- Children were happy, confident and settled in the service.
- Children were able to lead their own play and learning.
- Children benefitted from access to outdoors.
- Staff knew children and families well, and provided the support and care they required in a kind and nurturing way.
- The provider should develop quality assurance procedures.
- Children benefitted from a skilled staff team who worked well together.
- · Management were friendly and approachable.

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?	4 - Good
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?

4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Staff were kind and respectful in their approach with children, taking time to speak to children at their level. One parent commented "I find the staff very approachable when needing to ask them any questions". Another told us staff "Are loving and always available for a chat if required and are very informative about what my child has been up to in their care".

Children were happy and confident in approaching staff if they needed help or support. We could see positive relationships between them, and children told us that the staff were nice to them, and they liked coming to the sessions. One parent told us their child, "Has a very positive relationship with the staff, good for her social life as she is mixing with different primary ages and every time I pick her up she's always got a nice story to tell about something they've done at after school club that day".

Snack time was a relaxed and sociable experience, with children having the opportunity to develop their independence and life skills through self-serving and pouring their own drinks. Children had the opportunity to make suggestions for snack. A selection of fruit was available ensuring children always had a healthy option. Staff had involved children in reviewing snack procedures and the manager described this as ongoing to promote further independence and introduce children to a wider variety of foods.

Personal plans were in place for all children. Parents completed initial enrolment forms which contained information to help staff care for children and meet their needs. Plans took account of children's wellbeing needs and interests. Plans were in the process of being updated to include next steps and to give parents more involvement through their comments. This would help parents feel involved more in the service and allow them to share information about their child. We discussed with management that plans should ensure staff are aware of any changes to ensure children's current needs were being met.

We reviewed the procedures for the administration and storage of medication. We found that medication information was stored safely and securely. Staff had attended child protection training and were aware of the correct procedures to follow to keep children safe.

Quality indicator 1.3: Play and learning

We observed children having fun and fully engaged in their play. Children experienced a balance of spontaneous and planned activities and had opportunities to lead their own play and learning. One parent told us their child, "Gets to play and be a child". We saw staff responding to children's interests and requests. For example, chalk was asked for so they could draw round silhouettes of their peers. Children told us they could choose what to do, and if they wanted anything out to play with, they just had to ask.

Children enjoyed physical play, making rope swings, dressing up, being creative and playing board games with peers. Experiences helped to develop children's numeracy and literacy skills. For example, colour by number dinosaurs where staff helped a child to find out about the colour beige. One parent told us children could get involved in "Cooking, baking, sports, arts and crafts, problem solving, snack planning, board games, ball games and outdoor play". Another commented "Child lead play; they are not restricted on what they are allowed to do/play with".

When asked what the most positive aspects of your child's experiences in the service parents told us "Learn through play, learning responsibilities like helping to tidy up, socializing with other children", "Social aspect, meeting other children from other school" and "My child loves to go to after school club and do all different activities with their friends".

Children benefitted from access to a large gym hall and outdoor area. All children had the opportunity to play outside, and children told us that they got to go outside every day. Children were given the opportunity to free flow between the gym hall where they could play basketball and practice their skateboard skills. Children's safety was promoted as outdoor play was monitored to ensure appropriate staffing levels.

Social media was now used for sharing photos and information with families so they could see what children were doing during their time at the setting. This promoted parental inclusion in the service.

How good is our setting?

4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

The setting was bright, clean, and welcoming for children. As well as the use of a playroom and gym hall children had access to a large outdoor area. The main room had tables and chairs for children, and a small comfy area for children to rest and relax.

The environment helped to give children the sense that they were important to the service as they independently moved about the spaces available to them. There was a limited variety of resources for children to access, with more stored. Resources available took account of children's stages of development and interests. For example, there was a selection of art materials, as this was very popular with several children. The manager, staff, committee and children acknowledged the range of resources was limited. A review was taking place to catalogue resources and money had been allocated to purchase more. Children were consulted and their ideas were detailed in a floor book. The manager was open and enthusiastic to develop floor books further as they recognised the importance of inclusion.

Children requested time limited access to their IPADS when in the setting. At the recent Annual General committee meeting this was agreed. This was being monitored by staff and children and meant everyone was involved in decision making.

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During our visit, we saw children having fun in physical play in a safe outdoor area. They also had the opportunity to participate in risky play through loose parts and open-ended resources. For example, skipping ropes used as swings and box of scarves being used for role play. The outdoor area also had a shelter and seating areas for children to rest and relax if they wanted.

Equipment within the setting was safe, clean and well maintained. We saw appropriate infection prevention and control procedures followed. Staff had completed training on infection prevention and control procedures, helping them to know how to care for children safely.

Risk assessments were in place for all areas for the service that children accessed. These were used appropriately by staff to keep children safe. Children were also involved in risk assessing areas, giving them the opportunity to develop life skills and to understand how to assess risk.

How good is our leadership?

4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 3.1: Quality assurance and improvement are led well

The manager was friendly, welcoming, approachable, and engaged well with the inspection. They were relatively new to the service and shared the skills, experience, and enthusiasm she brought with her to the service. Staff told us they found the manager to be supportive and approachable if they needed any help. This meant that staff were supported in their roles to offer better outcomes for children.

On arrival parents rang the out of school club doorbell, and staff would take the children to them. Parents were given a warm welcome and could chose to come into the service if they wished. One parent told us "Staff are super friendly and approachable. They always go over and above for the children. They don't make anything feel like a hassle".

An improvement plan had been written and detailed planned developments. Management understood the importance of seeking the views of staff, children and parents and taking them on the journey of improvement with the service. We signposted the HUB on our website which offered a range resources to support improvement planning resource for improvement planning.

Management had started to introduce auditing and monitoring of the service as part of their quality assurance process. They had identified areas for improvement such as introducing annual appraisals for staff. Management should create a more robust quality assurance system, including a monitoring calendar to organise the auditing system, to ensure a consistent approach. This should include an individual audit of accidents and incidents to help identify any issues or patterns that arise. (See area for improvement 1.)

Meetings and discussions gave staff the opportunity to discuss any issues and identify any training or wellbeing needs. One staff commented, "Everybody is very supportive of everyone, communication is good and easy to work together".

Areas for improvement

1. To support ongoing improvement within the service the provider, in partnership with parents, staff and children, should introduce a quality assurance calendar. This should include, but not be limited to, an individual audit for accidents and incidents.

This is to ensure the service complies with the Health and Social Care Standards (HSCS) which state:

"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?

4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

The service was appropriately staffed to meet ratios and the needs of individual children. Children benefitted from a staff team which had a mixture of experiences and skills. One parent told us "There is always enough staff for our child's care needs".

Staff participated in a variety of training which helped to develop new skills. For example, undertaking diabetes training to support an individual child. This allowed them to offer care to the children which met their needs. Staff told us that they felt one of the strengths of the service was how well staff worked with each other to deliver a quality service for the children and families.

Staff were always vigilant of children. They communicated when leaving areas, or when children were moving between areas. The use of radios was being considered as a further safety measure. Staff were flexible in supporting each other if needed in other areas. For example, if more children wanted to go outside staff would go with them.

The service was appropriately staffed to meet ratios and the needs of individual children. Management had planned to employ additional staff to further support children at busier times. This meant children were kept safe.

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 support children's health and wellbeing personal planning needs to record the necessary details for each child so that staff can effectively care for and support children's individual needs and interests.

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This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCC) which state: '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' (HSCC 1.15).

This area for improvement was made on 23 May 2023.

Action taken since then

Personal plans had been reviewed and contained the necessary details for each child.

This area for improvement has been met.

Previous area for improvement 2

To support children to safely and independently access resources and equipment changes in storing and presenting materials to children should be reviewed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCC) which state: 'As a child, I can direct my own play and activities in the way that I chose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCC 2.27).

This area for improvement was made on 23 May 2022.

Action taken since then

Resources and equipment were accessible to children. They were safely stored. Review of resources was taking place.

This area for improvement has been met,.

Previous area for improvement 3

To ensure consistently positive outcomes for children management and staff should continue to develop suitable quality assurance systems to ensure that the quality of the service is monitored and assessed effectively.

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

This area for improvement was made on 23 May 2022.

Action taken since then

Quality assurance systems were being developed. We signposted the manager to where she could access improvement and development resources. We have made an area for development in this report under quality indicator 3.1.

This area for improvement had not 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?	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?	4 - Good
4.3 Staff deployment	4 - Good

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