

Stoneyhill After School Club Day Care of Children

Stoneyhill Primary School
Clayknowes Way
Musselburgh
EH21 6UL

Telephone: 01316 530 820

Type of inspection:

Unannounced

Completed on:

7 May 2024

Service provided by:

Edinburgh and Lothians out of School
Care Network.

Service provider number:

SP2004006939

Service no:

CS2006117110

About the service

Stoneyhill After School Club is registered with the Care Inspectorate to provide a care service to a maximum of 55 children at any one time aged from entry into primary school up to and including those in first year of secondary school.

The club operates from the dining hall at Stoneyhill Primary School in a residential area of Musselburgh, East Lothian. Children have access to school facilities including toilets, gym hall and playground.

About the inspection

This was an unannounced inspection which took place on 24 and 26 April 2024. 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 children using the service
- received comments from ten families who use the service
- spoke with the manager and two staff
- observed staff practice and experiences for children
- reviewed documents
- spoke with external managers of the service.

Key messages

- Children were cared for by staff who respected them and were kind and thoughtful.
- Strategies to support individual children need to be further developed.
- Children would benefit from a wider range of play opportunities to provide fun, excitement and interest.
- Parents received information about their child and the activities that were provided.
- The manager should improve their knowledge of self-evaluation to enable an evidence based assessment of quality and outcomes for children.

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

Children were welcomed warmly into the club. There were two staff from the organisations pool of bank (temporary) staff present. These staff were known to children in the club which helped to promote consistency of care. Parents told us that they thought their children had good relationships with staff, which increased their confidence and feeling of security. Interactions between staff and children were respectful and children were very relaxed and familiar with the staff present. They asked for resources, chatted and laughed with staff.

There were documents which made up each child's personal plan. This is the information that staff used to meet children's care and support needs. When we talked to the manager it was clear that they knew the children in their care well but recording of the ways in which staff helped to support children was not detailed or effective. The manager should develop strategies of support for the children who need them. To ensure that they are effective they should be regularly assessed to gauge the impact and shared with staff who work in the club. As a result of limited improvement to develop individual strategies, the area for improvement in the previous inspection report has been restated (see areas for improvement 1).

Children had opportunities to plan the snack menu. Snack had been prepared for children prior to them arriving in the club but children did have some choice of what they wanted to eat. The snack process took some time, as snack started once all the children were present. We have asked staff to evaluate the snack process and make changes to ensure that outcomes for children are positive at this time. This should include staff sitting with children to ensure a social experience, opportunities to make snack and the provision of a drink with snack (see area for improvement 2).

Staff had carried out some work to support children with understanding their emotions and how these impact on their friends and peers. They had discussed with children the development of boundaries for behaviour with children. This work needed to be continued and shared more widely with children to establish a shared understanding of how to behave in the club and where to go if they needed additional support with self-regulation.

The systems for medication administration and recording were well organised and audited to ensure that children's safety was promoted. To promote children's physical wellbeing children had access to outdoor play and the provider organisation, Edinburgh and Lothians Out of School Care Network (ELOSCN), provided sports coaching across their services.

Quality indicator 1.3 - play and learning

On the day of our visit the hall had been set up for children's play. As the weather was good children chose to go outside to play. Children helped to set up the outdoor area, as this had not been done before they arrived. We discussed the balance between having activities planned and organised in advance and children having free choice to decide what they wanted when they arrived. If some of the activities were planned in advance it would enable staff to focus on supporting play, rather than carrying out the task of helping children access all the resources once they arrive.

Children were unable to lead their own play as the range and quality of play opportunities was limited. There needed to be an improved understanding from staff regarding play and how to facilitate and promote a mixture of free play and planned experiences. This was to ensure that children were excited, engaged, having fun. As a result of limited progress to improve the quality of play, the area for improvement in the previous inspection report has been restated (see area for improvement 3).

There was a floor book, which is a tool that can be used to record children's ideas, thoughts and experiences. Although there was some evidence of staff using this to record children's suggestions, the floor book was not consistently completed nor did it record the outcomes from children's play experiences. As a result of limited progress to improve the recording and evaluation of play activities, the area for improvement in the previous inspection report has been restated (see area for improvement 4).

Areas for improvement

1. To support children's health and wellbeing, the provider should ensure that there is a consistent and effective approach by staff for the ongoing assessment, development and review of all children's personal plan information.

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

'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

2. To ensure that the process for snacks and lunches provide children with positive experiences the manager and staff should evaluate the snack routine to ensure it meets with good practice and organisational procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible.' (HSCS 1.35.) and

'I can drink fresh water at all times.' (HSCS 1.39.)

3. Children should have opportunities for fun and learning in the club. To enable this the range, organisation and quality of play activities provided for children needed to be improved.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'As a child, my social physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

4. To support children's choice and to enable them to lead their own play the system for planning play activities and recording outcomes from play should be developed by the provider and 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, my social physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

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 club was provided in the school dining hall. We acknowledge that this has challenges when trying to arrange an environment which is welcoming, comfortable and homely. However, the manager and staff needed to ensure that the space was set out to offer children well resourced and comfortable places to play. The use of floor coverings, well organised and resourced areas for play and well maintained displays and children's art work, would give children the message that their need for a pleasant place to play mattered. As a result of limited progress to improve the the organisation and layout of the play environment , the area for improvement in the previous inspection report has been restated (see area for improvement 1).

The room was set up with some resources before children came in to the club to play. We spoke to the manager about the need to include more in the way of loose parts and real life resources for children's play. These items provide more opportunities for imaginative play and creativity. There were some new resources for outdoor play and these too could be further developed to include loose parts. There needed to be more play resources for older children and opportunities for children to take part in planting and growing. These additional resources would improve the quality of play. (See area for improvement 3 in quality indicator 1.3 - play and learning).

Children's safety and security was enhanced by the use of risk assessments. We asked the manager to ensure that children were able to take calculated risks in their play as this was an important factor in enabling children to understand what they were capable of. Play outdoors during the darker winter months and increased opportunities for taking responsibility would help to increase children's self-confidence.

On the whole resources were clean but procedures for ensuring that cleanliness was maintained for all resources were needed. The area used for making snack was clean but the staff needed to ensure that the fridge was defrosted to enable accurate temperature checking of food. The damage to the interior of the microwave meant that it could not be effectively cleaned. Although handwashing by children was carried out it was not supervised or re-visited with children to make sure it was effective (see area for improvement 2).

Children had access to an outdoor play space to the side of the school. They also had access to the main playground and regularly visited the play park. Staff had walkie talkies to aid communication when outdoors. Staff needed to organise a system that would enable children the choice to play indoors or outdoors during every session. This would help to provide children with the fresh air and physical exercise that they needed.

Areas for improvement

1. Consideration should be given to the layout and provision of play spaces in the club to ensure that children have access to comfortable, well furnished and resourced areas for play and relaxation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.23).

2.

Children's health should be promoted by infection prevention and control practices which ensure the environment is clean and well maintained. This includes monitoring the handwashing procedures for children and staff to make sure it is effective. Improving the checking of equipment for storing or heating food.

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

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.

Procedures for auditing the processes and some of the systems in place had been improved. The auditing system now took account of the quality of the recording which was being carried out. The manager need to ensure that this was completed accurately and regularly.

An action plan had been developed after our last inspection of the club but clear evidence had not been provided of what had taken place to meet the areas of the improvement. The manager of the club still did not have a firm understanding of 'A quality framework for daycare of children, childminding and school-aged children' or the process of self-evaluation. We again signposted them to the Care Inspectorate HUB which held a range of resources to support the understanding of these processes. Limited progress had been made to develop effective systems for self-evaluation. An area for improvement made in the last inspection report has been restated (see area for improvement 1)

Parents told us that they felt well informed about what was going on in the club. The manager tried to ensure that all parents received feedback about how their child had been during the session and provided a termly newsletter. Limited progress had been made to include parents in helping to evaluate the quality of the service provided.

Children had opportunities to make some choices such as snack or requests for some resources. The floor book was not up to date or complete with outcomes for children or evidence of the discussions that are had with children about behaviour or future activities. More complete recordings would enable the manager and staff to evidence how children influence the quality of the service. Limited progress had been made to include parents and children in the self-evaluation of the club. An area for improvement made in the last inspection report has been restated (see area for improvement 2).

Areas for improvement

1. Children should experience a high-quality service which is evaluated and continuously improved. To do this the manager should increase their knowledge of self-evaluation and quality assurance. This will enable evidence-based practices to be developed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. To enable parents and children to be actively involved in the life of the club. Parents and children should be consulted with in a meaningful way to actively inform the development and improvement plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I am supported to give regular feedback on how I experience my care and support and the organisation uses this to improve' (HSCS 4.8).

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

The club was well staffed to ensure that children's wellbeing and safety were supported. The organisation were ensuring continuity of staff by providing the same bank (temporary) staff, while they undertook recruitment to find another permanent member of staff for the club.

All temporary staff received induction when they became part of the organisation. Staff were proactive in supporting children and carrying out tasks, but the manager spent a lot of time directing staff and carrying out tasks that could have been delegated. To enhance team working the manager of the club should develop induction for their club to ensure that temporary staff are guided through their tasks and responsibilities for the session.

There were regular manager meetings and club team meetings to enable good communication across the organisation. The manager of the club was relatively inexperienced in the leadership role. We have asked the senior managers at ELOSCN to provide more structured opportunities for the manager to receive mentoring and support. This would enable them to further develop their skills and understanding in some areas of practice.

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, the provider should ensure that there is a consistent and effective approach by staff for the ongoing assessment, development and review of all children's personal plan information.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which

state that:

'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 29 June 2023.

Action taken since then

There had been limited progress to meet this area for improvement. Support strategies, for children who needed them, were not always in place. The process of reviewing plans also needed to include as assessment of how the plan was going and an update of the plan.

We have restated this area for improvement again in this report.

Previous area for improvement 2

Children should have opportunities for fun and learning in the club. To enable this the range, organisation and quality of play activities provided for children needed to be improved.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'As a child, my social physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 29 June 2023.

Action taken since then

There had been limited improvement to the range of and quality of play opportunities offered to children.

We have restated this area for improvement again in this report.

Previous area for improvement 3

To support children's choice and to enable them to lead their own play the system for planning play activities and recording outcomes from play should be developed by the provider and 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, my social physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 29 June 2023.

Action taken since then

There had been limited improvement to the planning and recording of children's play.

We have restated this area for improvement again in this report.

Previous area for improvement 4

Consideration should be given to the layout and provision of play spaces in the club to ensure that children have access to comfortable, well furnished and resourced areas for play and relaxation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which

state that:

'I am able to access a range of good quality equipment and furniture to meet my needs, wishes and choices' (HSCS 5.23).

This area for improvement was made on 29 June 2023.

Action taken since then

Limited improvement had been made to improve the layout of the main play space to ensure that it provided children with a pleasant place to play.

We have restated this area for improvement again in this report.

Previous area for improvement 5

Children should be able to develop independence and choice by accessing resources for their play. To achieve this the provider needed to ensure that staff organised storage spaces and audited play resources.

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

'I am able to access a range of good quality equipment and furniture to meet my needs, wishes and choices' (HSCS 5.23).

This area for improvement was made on 29 June 2023.

Action taken since then

The storage space for resources had been tidied and children could see toys and ask for additional equipment for their play. Staff should ensure that the limited storage space always enables children to see and access resources for their play.

This area for improvement was met.

Previous area for improvement 6

Children should experience a high-quality service which is evaluated and continuously improved. To do this the manager should increase their knowledge of self-evaluation and quality assurance. This will enable evidence-based practices to be developed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'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 29 June 2023.

Action taken since then

Limited effective work had been carried out to develop self-evaluation processes. We have again signposted the manager to tools which would assist in the self-evaluation of the service.

We have restated this area for improvement again in this report.

Previous area for improvement 7

To ensure continuity and good quality outcomes for children. The auditing and monitoring processes developed by the organisation should be carried out regularly and in a robust manner.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'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 29 June 2023.

Action taken since then

Changes had been made to the auditing procedures which strengthened the auditing procedures. These needed to be carried out regularly to ensure that they were effective.

This area for improvement was met.

Previous area for improvement 8

To enable parents and children to be actively involved in the life of the club. Parents and children should be consulted with in a meaningful way to actively inform the development and improvement plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I am supported to give regular feedback on how I experience my care and support and the organisation uses this to improve' (HSCS 4.8).

This area for improvement was made on 29 June 2023.

Action taken since then

Parents told us that they received a good range of information from the manager and the organisation. We could see where children had some opportunities to make choices but there was still work to do, to meaningfully include children and parents in aspects of evaluating the service.

We have restated this area for improvement again in this report.

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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