

Culbokie Primary School Nursery Day Care of Children

Culbokie Primary School
Culbokie
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Type of inspection:
Unannounced

Completed on:
12 June 2024

Service provided by:
Highland Council

Service provider number:
SP2003001693

Service no:
CS2007145089

About the service

Culbokie Primary School Nursery is registered to provide a day care of children service to a maximum of 24 children aged three years to those not yet of an age to attend primary school. The service is provided by Highland Council.

Culbokie Primary School Nursery is situated within the main school building in the village of Culbokie in the Ross and Cromarty area. The nursery consists of a large playroom, a cloakroom area, toilets, and an enclosed outside area accessed from the playroom.

About the inspection

This was an unannounced inspection which took place on 11 June 2024 between 8.30am and 4.00pm. 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 six children using the service;
- reviewed feedback received from 16 families;
- spoke with seven staff and management;
- observed practice and daily life; and
- reviewed documents.

Key messages

- Children's overall wellbeing was supported through warm, caring and nurturing approaches, contributing to children feeling loved and secure.
- Children experienced care and support in an environment that was warm and welcoming, which meant they felt valued.
- Approaches to play and learning had improved, which was contributing to children learning a broad range of life long skills.
- Improvement planning had led to positive change in children's experiences, supporting improved outcomes. Robust quality assurance and self-evaluation processes must now be fully embedded to sustain improvement.
- The newly formed staff team were developing strong relationships with each other, and children and families, which was contributing to a positive ethos within the setting.

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?	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 and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children's overall wellbeing was supported through warm, caring and nurturing approaches. Staff supported children throughout the day with compassion, ensuring their dignity was maintained. There was a calm and relaxed feeling within the playroom as a result. This contributed to children feeling loved and secure.

Personal planning information was used effectively, to ensure children received the care and support that was right for them. Staff spoke confidently about children's individual needs and knew them well. Parents were central to sharing information, regularly updating core information, and sharing information that may impact on their children. Staff recorded significant information and how they could support children. This meant that staff were able to anticipate children's needs and support them appropriately.

Staff worked with other professionals to ensure that children who needed support were being supported in the way that was right for them. Such as, using symbols and sign for communication. This contributed to children reaching their potential.

Mealtimes were calm and relaxed. Children had a number of opportunities to develop independence skills, through preparing snack, pouring drinks, selecting food and utensils, and tidying up after themselves. Staff sat with children, using these daily routines to build relationships and support developing language and communication skills through conversation. The transition to lunch had been reviewed. Children were now able to play for longer and had less waiting time. Staff supported children to develop healthy eating habits, eating with them and encouraging them to try new foods. As a result, children benefited from positive, social experiences.

Staff understood the importance of children having opportunities to rest and relax. They had created cosy spaces, inside and outside, where children could relax and enjoy quieter activities. This supported children's emotional security and overall wellbeing.

Quality indicator 1.3: Play and Learning

Children were leading their own play for the majority of the day, having fun with their friends or happily playing alone. Staff knew when to interact with children to support their play and learning, and when to stand back. This contributed to children's interests and learning being extended, without unnecessarily interrupting their play.

Staff interactions supported children's developing literacy and numeracy skills. For example, introducing new language in play experiences, referring to past events and resources in the playroom. They used mathematical language when children were building large and small structures, such as, taller and longer, more or less. Some staff were skilled at recognising when children needed more challenge, ensuring that activities were appropriate to children's stage of development. As a result, children were developing a wide range of lifelong skills.

Planning approaches were child centred and responsive to children's interests. Staff recognised opportunities to extend interests, for example arranging for a tractor to come to the setting, or bringing in vegetables and fruit for the children to grow. Intentional planning by staff was used to further extend learning. Resources around the setting reflected the children's interests and were displayed attractively, encouraging children to explore and engage with them. This supported children's developing imagination and curiosity.

Processes to effectively assess children's progress were in the early stages of development. Some staff were skilled at making quality observations of children's learning, and using this to plan for next steps. New staff were being introduced to the systems in place, with further training planned to support their understanding. Floor books captured children's voice as they talked about their interests and their learning. Parents were also invited to look through these and make comments.

How good is our setting?

4 - Good

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

Children experienced care and a support in a warm and welcoming environment. The playroom was furnished to a high standard, clean, tidy and well ventilated. Some homely touches had been introduced, such as plants and lamps. Children were able to freely access the secure garden. This meant that they had ample space for their needs and felt valued.

Resources supported children's learning. Books were displayed throughout the setting, both fiction and non-fiction, linked to the current interests of bugs and nature. Environmental letters and numbers were also displayed, supporting children to make the link between letters and beginning to read. Children were busy constructing dens and obstacle courses with large loose parts in the garden. This supported their problem solving skills, creativity and gross motor skills. Some real life resources were available within the setting. We discussed with the management team continuing to add to these to further support children's learning opportunities.

Staff understood the importance of recognising potential risk to children, such as broken resources, and took action to make the environment safe. They were aware of where children were, undertaking regular headcounts to ensure all children were accounted for. They also encouraged children taking part in risky play, such as climbing, supporting them to recognise risk for themselves, whilst not compromising play.

Infection prevention control measures were effective in reducing the risk of possible spread of infection. Children were supported to wash their hands throughout the day, particularly before eating meals and after using the toilet. Staff explained to children the importance of good hygiene when they were eating. Practices around food handling followed best practice guidelines. This supported children to stay safe and healthy.

How good is our leadership?

3 - Adequate

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

The setting's vision, values and aims were clear and had been shared with children, families and staff. Most parents who gave feedback, felt that they and their children were meaningfully involved in developing the service. They were asked to complete short surveys around areas that had been identified as areas for improvement in the last inspection, invited to coffee mornings with the manager, and welcomed into the setting. As a result, children and families were able to positively influence change within the service.

The management team had responded to feedback given at the last inspection, and improvement planning, and actions taken, had led to positive changes within the setting. Such as staff deployment being reviewed, and changed, to ensure children were effectively supervised, and arrangements for mealtimes had been changed, leading to a more positive experience for children.

Quality assurance and self-evaluation processes had been developed by the management team, and staff were developing their understanding of effective self-evaluation and improvement planning. These processes now need to be consistently and effectively implemented, to ensure high quality outcomes for children, and sustained improvement (see area for improvement 1).

Support and supervision systems had recently been re-introduced and new processes for staff appraisals were being developed. These provided opportunities for staff to meet with the manager to discuss their personal targets. However, it was still too early to assess the impact of these meetings on outcomes for children. The service should continue to ensure effective support and supervision meetings take place regularly.

Areas for improvement

1. To ensure improved outcomes for children and families using the service, the provider should ensure robust quality assurance processes are sustained. This should include, but is not limited to developing a shared vision which focusses on improvements and implementing effective self-evaluation processes.

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).

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.

The newly formed staff team had developed a very positive and warm ethos within the setting. They were respectful of each other, and the children. They were beginning to form close relationships with some parents and families, taking time to talk to them when they were in the setting. Some parents commented "I find them (staff) friendly and my child most importantly likes them." and "I'm getting to know some of them and build rapport".

The setting was appropriately staffed to meet the needs of children and to provide continuity of care. Additional staffing was in place to ensure that children received the care and support they needed. For example, during busier times of the day such as lunchtime, or when children needed additional support to enjoy their time in the setting. Staff breaks were well planned to limit interruption to the children's day. As a result, children benefited from quality engagement throughout the day.

Staff communicated very clearly with each other, such as when they were leaving an area or busy on a task. They had a clear understanding of their roles and responsibilities which contributed to children enjoying a positive experience. They recognised where gaps in supervision might appear, moving to ensure that children were supported and safe.

New staff were undertaking meaningful inductions to the setting. This supported them to develop the skills, knowledge and understanding required to support and care for children.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 26 January 2024, the provider must ensure improved and sustained outcomes for children. To do this, the provider must, at a minimum, ensure:

- a) robust and effective quality assurance processes are implemented;
- b) clear and effective plans are in place for maintaining and improving the service;
- c) regular and effective support and supervision for all staff is implemented;
- d) staff are supported to develop their knowledge and understanding around self-evaluation processes and are involved in the systematic evaluation of their work and the work of the service; and
- e) staff are supported to develop relevant individual skills, knowledge and understanding and to use this in their practice.

This is in order to comply with the Regulation 3 Principles and Regulation 15 (a) and (b) Staffing of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) (Requirements for Care Services) Regulations 2011, SSI 2011/210.

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).

This requirement was made on 4 October 2023.

Action taken on previous requirement

The management team had developed and implemented quality assurance and self evaluation processes following the last inspection. This had resulted in improvement planning that was contributing to positive change for children and their families. However, changes in the staff team meant some improvements were not yet fully embedded.

Met - outwith timescales

Requirement 2

By 26 January 2024, the provider must ensure children are safe and effectively supervised at all times and receive high quality care and support. To do this, the provider must, at a minimum ensure:

a) staff are effectively deployed within the nursery as is appropriate to meet the health, wellbeing and safety children.

This is to comply with Regulations 4(1)(a) and 15(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) (Requirements for Care Services)

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

'People have time to support and care for me and to speak with me.' (HSCS 3.16).

This requirement was made on 4 October 2023.

Action taken on previous requirement

The provider had reviewed and made changes to staffing levels, and staff deployment. Children were effectively supervised at all times as staff communicated clearly with one another and demonstrated a good understanding of their roles and responsibilities. As a result, the setting was now effectively staffed to meet children's needs.

Met - outwith timescales

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 wellbeing, learning and development, the provider should ensure staff are supported to develop skills in nurturing interactions and communication with parents and carers.

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.' (HSCS 3.14).

This area for improvement was made on 4 October 2023.

Action taken since then

There had been a number of changes within the staff team since the last inspection. The newly formed staff team demonstrated nurturing interactions with children and were observed to communicate clearly with parents and carers. The manager had spent time in the setting modelling positive interactions and communication. This area for improvement has been met.

Previous area for improvement 2

To support children's wellbeing, the provider, manager and staff should review and improve the mealtime experiences. This should include, but not limited to:

- a) increasing staff knowledge and competency in using Care Inspectorate good practice guidance: "Keeping children safe: supporting positive mealtime experiences in early learning and childcare (ELC)";
- b) promoting opportunities for developing children's independence and language skills;
- c) improving staff deployment and practice to ensure children are well supported during snack and mealtimes; and
- d) ensuring children experience positive transitions.

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 mealtimes in as relaxed an atmosphere as possible.' (HSCS 1.35).

This area for improvement was made on 4 October 2023.

Action taken since then

Mealtimes had been a focus for self evaluation and improvement following the last inspection. Children, families and staff had been consulted and had contributed to making positive changes. Opportunities for independence had increased at lunch time. Changes to staff deployment meant that staff were able to support children, who were now benefiting from positive social experiences. Staff were more aware of the possible risk of choking and were vigilant when children were eating. This area for improvement has been met.

Previous area for improvement 3

To ensure all children can access well-resourced play areas and experiences which support and extend children's learning, the provider, manager and staff should review and improve the play and learning resources available to children.

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).

This area for improvement was made on 4 October 2023.

Action taken since then

Play and learning resources had been reviewed and changes made. For example, more loose parts and natural resources had been added to the environment. Resources were attractively displayed and were connected to children's current interests. This was supporting children to make choices, and access a range of resources that were suitable for their stage of development. This area for improvement has been met.

Previous area for improvement 4

To support children's learning and development, the provider should ensure that staff knowledge and skills are consistent with good practice guidance for developmentally appropriate play and learning activities.

This should include, but is not limited to the following documents:

- Realising the Ambition: Being Me; Education Scotland.

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 (HSCS 3.14).

This area for improvement was made on 4 October 2023.

Action taken since then

New, and remaining staff, demonstrated a good understanding of how to effectively support children in their play and learning. Quality assurance processes were in the early stages of monitoring staff practice, to inform where any areas for development may exist. This area for improvement has been met.

Previous area for improvement 5

The provider should ensure that children are protected from risk of harm. This should include, but is not limited to:

- a) effective systems are in place to ensure the environment is a safe place for children; and
- b) staff are skilled in identifying and addressing risks and implement this consistently in their practice.

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

'My environment is safe and secure.' (HSCS 5.17).

This area for improvement was made on 4 October 2023.

Action taken since then

Action had been taken to remove any resources that posed a potential risk to children. Staff now recognised where risk could occur and were confident to take action to address risk. This contributed to children playing and learning in an environment that was safe and secure. This area for improvement has been met.

Previous area for improvement 6

To support children's health and wellbeing, the provider, manager and staff should improve current infection control procedures. This should include but is not limited to:

a) effective supervision of children's hand washing.

This is to ensure that infection prevention and control practices are consistent with the NHS Scotland document: 'Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings)'.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

This area for improvement was made on 4 October 2023.

Action taken since then

Effective infection prevention control measures had been introduced, following best practice guidance, and were now embedded in the daily routine. Children were supported to effectively wash their hands throughout the day which helped reduce the risk of the possible spread of infection. This area for improvement has been met.

Previous area for improvement 7

The provider should ensure children receive personal care in an environment that is pleasant and supports high levels of infection prevention and control. This should include, but is not limited to:

a) appropriate nappy changing facilities; and
b) providing a welcoming environment, free from unpleasant odours.

This is to ensure that children's personal care practices are consistent with the Care Inspectorate document 'Nappy changing for early learning and childcare settings (excluding childminders)'.

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

'If I require intimate personal care, there is a suitable area for this, including a sink if necessary.' (HSCS 5.4).

This area for improvement was made on 4 October 2023.

Action taken since then

Facilities available for intimate care, such as nappy changing, now meet with best practice guidance. An investigation into the cause of unpleasant odours was undertaken, resulting in nappy changing bins being replaced. The environment was now free from unpleasant odours. 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	5 - Very 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?	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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