

St. Columba's Playgroup (Annan) Day Care of Children

St. Columba's Church Hall
Scotts Street
Annan
DG12 6JG

Telephone: 01461 204 097

Type of inspection:
Unannounced

Completed on:
7 June 2024

Service provided by:
St. Columba's Playgroup (Annan)

Service provider number:
SP2003003408

Service no:
CS2003015024

About the service

St. Columba's Playgroup provides a daycare service for up to 28 children at any one time aged from 2 years 9 months to those not yet attending primary school. On the day of inspection, 25 children were present, all between the ages of 3 to not yet attending primary school.

Children have access to a playroom and their own secure outdoor space, and they can freely move indoors and outdoors. The centre is located in a semi-rural village and is within walking distance of local amenities.

The service operates in partnership with Dumfries and Galloway Council.

About the inspection

This was an unannounced inspection carried out by one inspector from the Care Inspectorate, on Thursday, 6 June 2024, between 09:30 and 16:30 and Friday, 7 June 2024, between 10:00 and 12:15.

To prepare for the inspection, we reviewed information about the service. This included registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- observed practice and daily life;
- spoke with six children using the service;
- reviewed documents;
- spoke with the manager and staff; and
- 17 completed questionnaires were received from parents/carers to gather their views and feedback.

Key messages

- Children were happy, secure and had formed positive relationships with staff and the manager.
- Children benefited from a wide range of natural, open-ended resources indoors and outdoors.
- Children benefitted from connections to their local community.
- The new manager and staff worked very well together to create a culture of shared responsibility.
- There was a positive staff ethos and staff worked well together.

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?	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 outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support.

Children experienced warm and nurturing interactions from staff who knew their needs and preferences. Important information had been gathered about children prior to them attending the service, and children were allocated a key worker who took time to get to know their likes, dislikes, and daily care needs. Parents told us: "Staff were very cheery and knowledgeable when we went for a pre-start visit. They are keen to develop connections with children" and "The staff members are very caring, engaged and nurturing. They are clearly invested in the children's wellbeing and go above and beyond to bring creative, fun, and personal learning experiences to the children". This showed that trusting relationships had been built.

Staff were kind and caring in their interactions when supporting children with personal care. We observed that children's permission was sought before personal care was carried out. This meant children's privacy was respected and their play was not disrupted whilst ensuring their care needs were met.

Children ate their lunch all together in the playroom, which contained appropriately sized tables and chairs. This ensured children's comfort and enabled effective supervision. Children and staff sat together most of the time, which provided an unhurried and relaxed atmosphere and ensured a caring and positive social experience. Some staff were task-oriented during lunchtime which meant they were not well placed to support children's needs. Children were encouraged to serve their own foods and drinks which helped develop their independence.

Staff knew children well. Personal care plans identified children's likes and dislikes and some targets to support children's development. We suggested that care plans be further developed to ensure they identified clearer strategies that show how children's needs will be met. This would ensure that staff have all the information they need to support children's individual care needs.

Children were kept safe and well. Medication was stored securely, and children's medication records were accurately completed. Accidents and incidents were recorded and appropriately shared with parents. These processes supported children's overall wellbeing.

Quality indicator 1.3: Play and learning.

Children were settled and engaged in play across the service. They told us they enjoyed playing with their friends outside, and they could follow their own interests as they explored their environment. The service supported children's movement freely between indoor and outdoor spaces; there were few disruptions to their play as these transitions were planned for and supported. This ensured children could lead their play and benefited from extended periods outdoors.

Throughout the service, children benefitted from a variety of natural, open-ended resources. For example, we saw children having fun making mobiles with 'sellotape' and a range of recycled materials. This supported children's development of curiosity, imagination, and problem solving skills during indoor and outdoor play.

Staff provided children with opportunities to develop early language, literacy, and numeracy skills through play. The service used stories indoors and outdoors, mark-making with various materials, numbers, and measuring equipment in many areas, and children joined in with action songs. As a result, children explored language, numeracy, and literacy through play.

The planning processes were still in the early stages of development. Staff had been recording observations of the children, but the quality of these observations varied. While some staff had noted down the children's activities, they did not consistently identify the learning that had taken place or how they would support the children to make progress. Staff should develop their skills in recording observations of the children. This would help them to identify the children's achievements and plan the next steps for their development.

How good is our setting?

4 - Good

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

Quality indicator 2.2: Children experience high quality facilities.

Children experienced a well-lit setting with suitable ventilation. It was a homely environment with real furniture, lamps, comfortable cushions, and bean bags. While some children's work was displayed at their level, most displays were too high for children to see. We suggested that where possible, displays should be lowered to children's height. This would help children feel that they matter and build their self-esteem.

Children had dedicated play spaces and access to outdoor space, with resources to meet their needs and stage of development. Most parents strongly agreed that their children had access to a good range of quality toys and play materials. Play spaces reflected some children's interests and preferences, and staff supported children during play. For example, when children were interested in painting the shed, a staff member supported the children by pretending the water was paint, and the children used it to paint the shed. This helped children to learn through play and develop their imagination.

Staff understood their roles and responsibilities regarding infection prevention and control. For example, they supported children in washing their hands at appropriate times. This minimised the risk of cross infection, keeping children and staff safe and healthy.

Staff accessed the wider community with the children. They went on local walks, learned about trains, and visited the local train station. This supported children's learning about transport and helped them develop a sense of belonging in their local community.

We found the changing area located within the staff and visitor toilet this did not support a relaxed, dignified, safe and sociable experience for children requiring personal care. Facilities should provide children with a safe, clean environment while promoting privacy and dignity and ensuring the best possible outcomes. The changing experience should be a relaxed, happy, and social routine that provides valuable opportunities for interactions between staff and children on an individual basis. We discussed this with the manager, that a suitable area be identified. To support this, we signposted the service to 'Nappy changing for early learning and childcare settings' (excluding childminders). (See area for improvement 1.)

Areas for improvement

1.

To ensure children's health, welfare and dignity are promoted, children's nappy changing facilities should be improved.

This should include, but not limited to the prevention of spread of infection, respecting the privacy and dignity of children and supporting the wellbeing of staff and children.

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 needed' (HSCS 5.4);
and

'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16).

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 improvement are led well.

The manager and staff engaged well during the inspection process and were receptive to our suggestions for improvement. The manager made some changes from our suggestions before the conclusion of the inspection. For example, we highlighted an issue with the toilet door, and this was addressed before we concluded our inspection. This supported a culture of continual improvement.

The service had developed a monitoring calendar and an improvement plan, identifying key priorities to support development and improvement. This involved shared responsibilities throughout the team. Monitoring staff practice, children's personal plans, medication, new planning processes, and the environment were key areas of improvement and were still being developed. Management shared feedback to staff with areas of strength as well as any areas of improvement. This was supporting staff to review and reflect on their practice while understanding their roles and responsibilities.

We recognised the changes that have been made to improve children's play and learning since the last inspection. The manager and staff met regularly to discuss children, experiences, areas that were working well, and areas of improvement. We would encourage the manager and staff to continue to develop this to ensure that any improvements are sustained and that they continue to make progress in developing the service. This would support positive outcomes for children and families.

Quality assurance and self-evaluation processes were at the early stages of development. For example, the manager and staff had put in place 'focus children' which is linked to the planning documents, and they had plans to track children's learning. The manager and staff spoke confidently about how these would continue to support positive outcomes for children and families. We encouraged the manager to continue to embed and evaluate recent changes.

Staff had developed positive relationships and effective communication with parents. Parents were welcomed into the service at drop-off and collection times, and the team promoted an open-door policy. Parents were invited to parents' 'brew and blether', and the manager sent out regular communication

through newsletters, social media and the service's online learning journals. Parents told us they received "Questionnaires and feedback sheets regularly", and "Handovers are always well detailed, their learning journals are useful insights, the Facebook page is also a nice tool for snapshots of the week". As a result, parents were encouraged to participate and were informed about their child's play, learning and development.

Staff leadership roles were in the early stages of being developed. Staff had been consulted on their roles, resulting in plans for them to lead initiatives and programmes they were passionate about. For example, identified 'champion' roles in outdoor learning which will support staff to lead improvements based on their interests.

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.

Quality Indicator - 4.3 Staff deployment.

Staff were warm, welcoming, and caring, and the nursery had a positive ethos. The nursery was appropriately staffed, and staff were suitably deployed throughout the day to meet children's needs. Throughout the service, there was a focus on the children as individuals, ensuring that children felt respected and valued.

Staff worked well together as a team, and their different skills and knowledge complimented each other. This resulted in positive interactions with the children. Parents told us: "All staff know my child well and their needs. They are always on hand for any questions we have", and "Staff are friendly and helpful. My child enjoys being around them". Staff moved in response to children's requests, for example, when children wanted to access outdoor play and when they required one-on-one support.

Overall staff positioned themselves appropriately for maximum supervision both indoors and outdoors. Staff communicated well with each other, transitions were planned, and children were familiar with the daily routine. Staff shared with us, "We have extra staff than the ratios, which allows us to meet the needs of the children as we can provide more 1 to 1 support if needed. The staffing also allows us to have free-flow play between the indoors and outdoors."

The manager effectively supported staff by spending regular time on the nursery floor. This helped to build positive working relationships and allowed time for professional discussion. Staff were happy, engaged, and shared tasks through working as a team. Staff lunches were organised to minimise disruption, ensuring the day ran smoothly to support the children's play, care, and learning.

At the end of the day, staff had time to reflect, discuss children individually, and plan for the following day as a team. Staff meetings were held regularly to discuss planning, children's needs, areas that were working well within the nursery, and areas that needed to improve. This resulted in a staff team that worked well together to meet the needs of the children in their care.

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 safety and wellbeing, the service should update existing policies and procedures relating to medication.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'If I need medication, I am able to have as much control as possible' HSCS 2.23.

This area for improvement was made on 1 June 2018.

Action taken since then

The manager and staff had made improvements in developing medication policies and procedures. Staff and the manager had knowledge and understanding of their roles and responsibilities.

This area for improvement is met.

Complaints

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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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