

Gigglebox Out of School Care Day Care of Children

Stanley Primary School
Stanley Road
ARDROSSAN
KA22 7DH

Type of inspection:
Unannounced

Completed on:
9 July 2024

Service provided by:
Gigglebox Out of School Care Ltd

Service provider number:
SP2016012787

Service no:
CS2016350640

About the service

Gigglebox Out of School Care is registered to provide a care service to a maximum of 30 children attending primary school only. The service is located within Stanley Primary School, Ardrossan, North Ayrshire and is located within close proximity to local amenities including parks, green spaces and transport routes.

About the inspection

This was an unannounced inspection which took place on Tuesday 9 July 2024 between 09:15 and 17:30. The inspection was carried out by two inspectors 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 people using the service
- received four completed questionnaires from parents of children attending the service
- spoke with all staff and management
- observed practice and daily life for children attending the service
- reviewed documents.

Key messages

- Children were happy and relaxed at the service.
- Children independently led their own play experiences.
- The provider should ensure that staff are registered with the regulatory body the Scottish Social Services Council (SSSC) within the required timescales.
- The provider should ensure staff receive training in child protection to ensure they are confident with the steps to take to safeguarding 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?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
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?

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

Staff were kind and caring in their approach towards children. They were compassionate, friendly and had built meaningful relationships with children. This supported children to feel secure, confident and respected. The provider spoke of their plans to prioritise building relationships with parents and we encouraged them to continue with their plans. This will further strengthen relationships and ensure all families feel included in the life of the service.

Staff knew children well and they told us about their individual needs, personalities, and interests. Most parents who responded to our questionnaires agreed that they were involved in developing and reviewing their child's personal plan and all parents agreed that they were always welcomed in to the setting to discuss their child's care, play and learning. Personal plans had been implemented for all children and the quality of information gathered had improved. However, the review process for personal plans was inconsistent. We discussed with the provider that all plans must be reviewed within a period of six months or sooner where necessary. We suggested children could be more involved in updating their plans to empower them to take ownership of their play and learning while attending the service. The provider agreed that reviews would be better planned to ensure children consistently received the right support at the right time.

A range of morning snack and breakfast options were available for children to access on arrival at the service and ensured children were supported to have a nutritious meal prior to attending a community outing. This meant that children's dietary and health needs were met, their energy and concentration levels were supported, enabling them to have fun and enjoy their day ahead.

Children's health and wellbeing was supported by a clear administration of medication policy and procedures. As there were no children in the service requiring medication, we sampled the services policy, procedures and consents forms and found that these were in line with Care Inspectorate's guidance 'Management of medication in day care and childminding settings.'

Quality indicator: 1.3 Play and learning

Children were having fun and engaged in play throughout the day. They spent most of the day at a local park/woodlands and when within the setting premises, they confidently accessed play materials of their choice. All children we spoke with told us they 'had fun' at the service, had 'made friends' and 'loved the holidays' where they could go on outings. This told us that children were happy, settled and enjoyed the play and learning experiences available to them.

Whilst the systems for planning for play and learning did not evidence how children's interests were used to influence play and learning experiences, children told us that staff listened to their ideas and used their interests and real life experiences to plan and extend their play. For example, children had recently planned and held their own wedding in the service. They agreed roles, dressed up and wrote their own speeches. This supported children to develop their confidence, creativity and literacy skills through fun, exciting and meaningful experiences. We shared with the provider how they could develop their planning processes to

include child initiated play ideas and they agreed to further develop this to ensure activities were consistently fun, challenging and exciting for children.

Staff had worked with children to revisit and instil rules and expectations within the setting to ensure respectful interactions. This supported children to understand developmentally appropriate boundaries. The provider spoke of their plans to further develop children's rights based practice and increase children's ownership within the setting. We shared with the provider how children could have more involvement in leading aspects of service. For example, development of the children's committee. This supports ownership and inclusion within the setting.

During school holidays, children were consulted about outings and activities they wanted to participate in. This informed the holiday activity planner which was completed in advance and allowed families to book in for sessions that were of interest to their child. This demonstrated to children that their opinions were respected. As a result, children were happy and knew what to expect from their day.

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.

Quality indicator: 2.2 Children experience high quality facilities

Children has access to a dedicated room within the school building which had ample space for children to play together or on their own if they chose to do so. The playroom was in a good state of repair with furniture that was appropriately sized for the children attending the service. The environment was set out to provide different play spaces, such as a cosy corner and snack area and staff had recently started to involve children more in how to develop these areas. Children were encouraged to display their work on the walls and to decorate and label trays to keep their personal belongings. This supported a sense of inclusion and demonstrated to children that they mattered.

The service was well ventilated with cleaning schedules in place to support a hygienic environment. Daily checklists and risk assessments were successfully supporting staff to control elements of risk and maintain a safe environment for children. Prior to attending an outing, children were involved in discussions about expectations and how to keep safe. This meant that children were encouraged to manage risks and develop life skills.

Whilst we recognise that children were enjoying play activities, some resources were provided for the children in boxes on the table, such as, Lego blocks and felt pens. These resources were chosen by staff, not laid out in an inviting manner, or encouraging for the children to engage with. Further consideration should be given to the presentation of play experiences to ensure they are inviting for children supporting high levels of engagement.

Children accessed the gym hall within the school and had use of an outdoor area within the school grounds to support their physical activity. Whilst this was not observed during our inspection, we sampled photographs and observed the facilities. Children spoke positively of these experiences and we were satisfied they enabled children to be physically active, supporting their health and wellbeing.

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 service was staffed by the provider and a small staff team. The staff team was of mixed skills and experience working within early learning and childcare. The provider worked alongside the staff, providing care and support on a daily basis. This helped to create a positive working environment and created a shared vision for the service.

We sampled staff recruitment processes and found these to be in line with best practice guidance, ensuring children's safety. Staff were kind and caring in their approach with children. Staff chatted with children about their day and showed genuine interest in children's lives. As a result, children felt respected and valued.

The provider and senior staff member were qualified and currently working towards higher level qualifications. They had begun to engage in reflective practice which led to some improvements. For example, improvements had been made to where children's personal belongings were stored at collection times. As a result, staff spent more time caring for children. We discussed with the provider how the use of a self-evaluation tool kit or framework would support self-evaluation to consistently focus on improving experiences and outcomes for children and families. We sign posted the provider to Care Inspectorate's hub, where they can access Care Inspectorate's, 'A quality framework for early learning and childcare, school-aged childcare and childminding services,' the self-evaluation tool kit and bitesize videos to further support outcome focused improvements.

The provider had reviewed their approach to quality assurance. Processes had now been established, however, this was still in the early stages and gaps remained. For example, a monitoring calendar had been established however, monitoring was not consistently carried out as planned. The provider should continue to further embed their quality assurance processes to ensure improvements are made and children experience a high-quality service.

The provider had reviewed and improved some of the service policies and procedures to ensure they reflected current legislation and guidance. As part of this inspection we requested to access some policies and confirmation of insurances, however, they were not available and there was a significant delay in the provider providing this information. The provider should ensure all policies and relevant insurance certificates are stored on the premises to ensure they are accessible to staff and parents. This will ensure both staff and parents understand what to expect from the service delivery.

How good is our staff team?

3 - Adequate

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

Quality Indicator 4.3: Staff deployment

Staff to child ratios were maintained and staff worked well together as a team and organised themselves across play spaces. We observed staff communicating effectively when they were required to leave the main play space and the use of mobile devices ensured effective supervision of children at all times.

Daily verbal discussions between the provider and staff and occasional team meetings helped to ensure the team were well informed about the service and the needs of the children. We discussed with the provider

how meetings and minutes of discussions could be better recorded to ensure where further actions are needed, it is clear who has responsibility. This will ensure accountability and leadership within the team.

Whilst we recognise that staff had varying skills and experience, since gaining employment within the setting there were limited opportunities for staff to attend training or undertake professional learning. Through discussion, staff demonstrated an understanding of how to protect children from harm. However, the provider should prioritise sourcing child protection training for all staff to ensure their knowledge reflects the most current guidance. This will ensure staff are suitably skilled to support children (area for improvement 1).

The provider had not monitored staffs registration with regulatory body, Scottish Social Service Council (SSSC). This significantly impacted on staff deployment as only one person was registered as required. This meant that at times across the day, children were cared for by a non-registered workers. The provider took prompt action to ensure one staff member had applied for registration. However, at the time of publication of this report the application remained pending. As an interim measure, we asked that the provider undertake a robust risk assessment and implement mitigations to ensure children and staffs safety (area for improvement 2).

Areas for improvement

1. To promote high quality care and support for children, the provider should ensure that all staff have access to a program of core training to support them within their role. Priority should be given to staff accessing further training in Child Protection.

This is to ensure that staffing is consistent with the Health and Social Care Standards (HSCS) which state: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14) and "I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

2. To ensure that staff safely recruited and deployed affectively to meet children's needs, the provider should ensure that all staff working with children are registered with a regulatory body, 'The Scottish Social Service Council (SSSC)' or equivalent. All staff should apply for registration within three months of gaining employment and be registered by six months. The provider should develop appropriate quality assurance process to ensure they have an overview of all staffs registration requirements.

This is to ensure staffing is consistent with the Health and Social Care Standards (HSCS) which state; "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

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
1.2 Children are safe and protected	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?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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