

Bathgate Early Years Service Day Care of Children

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Type of inspection:
Unannounced

Completed on:
28 June 2024

Service provided by:
West Lothian Council

Service provider number:
SP2003002601

Service no:
CS2006131765

About the service

Bathgate Early Years Service is situated in a residential area of West Lothian. The service operates within a single storey building and has sole use of the premises. Children have access to an entry area, large playroom and a fully enclosed outside area. Children's toilets and a designated changing area are situated to the side of the playroom. A small area outwith the playroom is available for quiet time and sensory activities. A small kitchen area is used for the storage and preparation of snacks.

The service is provided by West Lothian Council and is registered to provide a day care of children service to a maximum of 76 children aged from 2 years to not yet attending primary school at any one time, of whom no more than 10 are aged 2 years to under 3 years.

About the inspection

This was an unannounced inspection which took place on 12 June 2024, between 8:45 and 17:30 and 13 June 2024 between 8:00 and 15:35. Feedback was given at the end of the second inspection visit. 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 a number of children using the service
- spoke with and gathered feedback from 23 families
- spoke with management, staff and a visiting professional
- observed practice and children's experiences
- reviewed documents.

Key messages

- Overall children experienced nurturing care and respectful interactions.
- Children were supported to lead their play and learning.
- Children's individual interests were supported well.
- Play spaces were well structured, enabling choice and free movement.
- Quality assurance was developing well.
- Children's personal plans could be developed to better support their individual experiences.
- Management of significant incidents needed to be reviewed.

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?	4 - Good
How good is our leadership?	3 - Adequate
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?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality indicator 1.1: Nurturing care and support

Children experienced nurturing care throughout their day. Kind and respectful interactions supported them to feel safe, secure and well cared for. One parent told us "Staff are always welcoming and friendly."

Personal care was sensitively supported and promoted children's independence, privacy and dignity. Staff were respectful of children's individual needs and wishes throughout these experiences.

Staff recognised most children's individual cues and sensitively responded when they were seeking comfort and reassurance. Children were encouraged to explore and express their emotions. For example, gentle chats with staff and emotion cushions promoted their understanding of their feelings and those of others. This promoted a sense of being valued and listened to. The service should now enhance opportunities for children to understand their emotions.

To promote a happy transition between the home and care setting for all children, the service should review the current welcome routine. We discussed support strategies to help children settle in with ease and enjoy the start of their day in the setting. This included encouraging families into the playroom and working with them to build children's confidence at this time.

Staff knew the children well. Information sharing with families and working with other professionals helped staff to remain knowledgeable of children's individual needs. However, significant information was missing from some children's personal plans. This included identified additional support needs and strategies to promote continued development and enjoyment. Also, for some children, identified strategies were not implemented within a timely manner. This delayed additional support being provided and had the potential to negatively impact on children's progress. Information about children's care needs was stored in different places. This meant staff did not always have easy access to relevant information to help them effectively plan for children's care. Reviews by management had identified some of the issues raised about personal plans. They were working with staff and the provider to improve information recording and the quality of children's care plans. At the last inspection we highlighted improvements needed to enhance the quality of information recorded in children's personal plans and an area for improvement was made. We recognised the ongoing work to enhance care plans, however this area for improvement remains outstanding (**see area for improvement 1**).

Relaxed, sociable and unhurried mealtimes gave children time to sit with their friends and enjoy their food. Children's health was promoted with the provision of nutritionally balanced snacks and meals and the safe management of allergies. Staff sat with children, chatting to them and promoting positive mealtime habits. Children's independence skills were encouraged as they self served food and drinks and washed their own dishes. Management had identified the need to increase opportunities for children's involvement in the planning and preparation of snacks. This would further promote children's independence and understanding of where food comes from.

Quality indicator 1.3: Play and learning

Most children were busy and engaged in their play. Throughout the day they had fun as they freely explored a range of experiences which provided challenge, creativity and discovery. Consideration should now be given to activities and resources to promote enhanced play opportunities for the younger children.

Consultative planning gave children a voice and encouraged their involvement in the provision of daily activities. This contributed to an interesting learning environment which recognised the importance of self led play and learning. Staff were responsive to children's interests and quickly acted on requests for resources to extend play.

Children's learning and development was captured throughout planning walls, floor books and Personal Learners Journeys. This encouraged children to revisit their learning and enabled them to share their experiences with their families. Assessment and evaluations of children's learning supported planning approaches to promote continued success and individual achievement. We asked families about opportunities to discuss their child's learning: we received mixed responses. Families' comments included "I get regular updates on Seesaw from my child's key worker, this allows me to see what they have been achieving or what they need to work on" and "The discussions are prompted by parents. Seesaw is not regularly updated specifically for my child. Sways are shared monthly, but photos of my child are not replicated in his Seesaw file." The service should ensure all families are aware of how information is shared and that they receive up to date information about their child's progress.

Children were learning as they enjoyed various activities which promoted the development of language, literacy and numeracy skills. For example, looking at books, listening to stories and singing. Children enjoyed measuring and weighing using large wooden scales. Effective questioning by staff encouraged children to widen their thinking and further explore weighing materials to extend their learning in a fun way.

Children enjoyed various risky play opportunities. For example, creating large structures with blocks to balance on and jump from, woodwork areas and use of fire pits. This promoted challenge, problem solving and encouraged children to explore boundaries and individual abilities. Children's understanding of risk and keeping themselves safe was promoted through discussions with staff who encouraged them to think and appropriately plan for risky play.

Areas for improvement

1. The provider should ensure children receive the care and support they need. This should include, but not be limited to, the appropriate recording of identified additional care and support needs, recording and implementing identified strategies of support in a timely manner and appropriate storage of information to ensure relevant people can access this when needed.

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).

How good is our setting?

4 - Good

Quality indicator 2.2: Children experience high quality facilities

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Indoor and outdoor play spaces were thoughtfully structured to take account of children's current interests. Areas were well resourced with materials that supported children's curiosities, play and learning. As a result, children had fun, and most were engaged in their play.

The organisation of resources in the playroom and outside play area supported children to independently choose and lead their own play. To support children's emotional wellbeing, consideration could be given to enhancing tactile materials within the sensory area.

Cosy, nurturing spaces throughout the setting offered children a comfortable place where they could rest and relax. Effective use of the natural environment gave children shaded areas where they could relax outside. Children were excited to tell us about the hammock, many stated it was their favourite place to play.

Children's physical and emotional wellbeing was promoted with free flow access to the outside area throughout the whole day. This gave children choice of where they wanted to play. Children had fun rolling and running up and down a large hill in the garden area. This and playing on bikes supported the development of coordination and strength.

Children's photographs and displays of their artwork and learning promoted pride and sense of belonging. This demonstrated to children they mattered, and their contributions were valued.

Children's health was promoted through positive infection prevention and control measures. For example, they were supported well to follow effective hand washing routines throughout key points of the day. The service should now extend this good practice and ensure children consistently wash their hands after playing outside.

Play spaces were clean, tidy and well ventilated. This promoted a pleasant play and learning environment for children. However, we raised issues regarding the cleaning of other areas within the service. The nappy changing area had not been effectively cleaned and a training seat within the bathroom was dusty with debris. This did not promote an inviting area for children's personal care. The kitchen area required a deeper clean, for example there was evidence of food debris in the cupboards and fridge. The food waste bin was dirty and flooring around the fridge had not been cleaned to an appropriate standard. The service took immediate action to address these issues and maintain the ongoing cleaning of all areas within the service.

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

We considered how the provider had managed a recent incident. Although we acknowledged the provider had taken steps to reduce risks; we assessed and discussed with managers that more could have been done to ensure the safety and wellbeing of all children (**see requirement 1**).

The service was led by a passionate management team who promoted a clear vision for the service. Through effective communication, management and staff had developed a shared understanding of what was important in the service. This helped to create positive outcomes for children and families.

Management had been developing communication and engagement with families. For example, sharing information through regular newsletters, telephone calls, in person and by various electronic methods. There had been some positive opportunities for families to express their views on events and activities. This included questionnaires after stay and play sessions and a Christmas fayre. Families who responded to our questionnaire gave mixed reviews about opportunities to be involved in the development of the service. Management should take action to ensure all families are aware of the methods in place to express their views and share comments and suggestions.

Quality assurance tools supported management and staff to identify strengths and areas for improvement within the service. This included a 'Quality Framework for daycare of children, childminding and school aged childcare', and the 'Health and Social Care Standards'. Evaluations from ongoing quality assurance were used well to create clear and realistic action plans to enhance outcomes for children. Monitoring systems were having some positive impact and should now be reviewed to ensure identified actions are followed up within a timely manner.

Requirements

1.
By 1 November 2024, the provider must ensure children's continued safety and wellbeing. To do this, the provider must, at a minimum:

Take action to enable children to continue to experience a service and remain protected following significant incidents.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (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 am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities'. (HSCS 3.20).

How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted on positive outcomes for children.

Quality indicator 4.3: Staff deployment

Following a period of significant change, staff and management were working well together to build positive relationships and develop as a team. Shared responsibilities and leadership roles promoted staff's confidence as they shared their knowledge and learning with each other to improve support and experiences for children and families. As a result, staff felt valued and supported as a team and by management.

Staff moved fluidly throughout the service in response to children's requests and chosen areas for play. They positioned themselves appropriately for maximum supervision, both indoors and outside. Effective communication as a team supported continuity of care when tasks took them away from their area of responsibility. For example, staff regularly checked with each other that they had an appropriate level of support in areas and confidently asked for cover when needed. This contributed to staff being continually available to children and promoted continued safety.

Staff breaks were planned to minimise disruption and provided support for children at busy times of the day such as mealtimes. Additional staff in the afternoon meant an appropriate level of staffing throughout the day. This also supported times of transitions such as children being collected, and staff shift patterns ending. As a result, children continued to experience free flow play and a good level of care.

Staff were supported to understand the impact of unplanned absences on the service provision. Management regularly met with staff, offering support where needed to support their capacity and maximise attendance. As a result, children and families were beginning to develop positive relationships with staff.

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

Requirements

Requirement 1

The provider must ensure that staff working in the service submit an application to the Scottish Social Services Council so they are registered within the specified timescales. Once registered, staff must ensure changes to their information is updated.

This is to comply with SSI 210 The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations SSI 2011/210 which refers to the provisions of regulations 9 (2)(c) Fitness of employees.

This requirement was made on 10 October 2018.

Action taken on previous requirement

All staff who were required to, were appropriately registered with the relevant body. Where needed, applications for registration with the Scottish Social Services Council were in process.

Met - within 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

Personal plans must be introduced for school age children registered with the wraparound part of the service. These should contain information to show how their health, well-being and safety needs are being met. To reflect nursery children's experiences in wraparound care, staff need to record relevant information within their personal plans/learning journeys. Each plan should be reviewed at least once every six months with parents and where appropriate children. The plans should be signed and dated.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'my personal 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) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me'. (HSCS 2.17).

This area for improvement was made on 10 October 2018.

Action taken since then

The wraparound service was no longer being provided. Therefore school aged children were no longer attending. The remainder of this area for improvement was not met. Further information can be found in the body of the report under quality indicator 1.1: Nurturing care and support.

Previous area for improvement 2

Staff in the wraparound care part of the service need to develop the use of the floor books as a planning tool. They should be able to demonstrate how they are supporting children's learning, development and interests.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors'. (HSCS 1.25). 'As a child, my social and 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 10 October 2018.

Action taken since then

The wraparound service was no longer being provided. Therefore school aged children were no longer attending. This area for improvement has been cancelled.

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	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?	4 - Good
4.3 Staff deployment	4 - Good

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