

# Happy Feet Nursery and Out of School Club Day Care of Children

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**Type of inspection:**  
Unannounced

**Completed on:**  
14 August 2024

**Service provided by:**  
Happy Feet OSC Limited

**Service provider number:**  
SP2010011183

**Service no:**  
CS2010273623

## About the service

Happy Feet Nursery and Out of School Club is registered to provide a daycare of children service to a maximum of 110 children at any one time, aged from birth to those not yet attending primary school. The service is provided from purpose-built premises in the Larkhall area of South Lanarkshire. The setting is close to shops, parks, transport links and local amenities.

Children receive care across three age related playrooms and access two outdoor play spaces to the front and rear of the premises. Children also have opportunities to access a forest school programme in the wider community.

## About the inspection

This was an unannounced inspection which took place on Tuesday 13 August 2024 between 08:50 and 16:15. The inspection was carried out by two inspectors from the Care Inspectorate. We concluded the inspection on Wednesday 14 August 2024 when we also gave inspection feedback. 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 in each of the playrooms and reviewed 24 survey responses on the quality of the setting from parents whose children attend the service.
- Spoke with the management team and five members of staff. We also received nine survey responses from staff.
- Observed practice and staff interactions with children.
- Reviewed documents.

## Key messages

- Children's needs were well supported by effective personal planning. This had ensured staff caring for children had a clear overview of their individual needs and preferences.
- Children benefitted from the outdoor play and learning opportunities that they accessed within the local community.
- Some areas and resources within the setting would benefit from being refreshed and more robustly risk assessed. This will contribute to children's safety and wellbeing.
- The management team were motivated and committed to supporting the staff team in the continuous self evaluation and development of the service.
- There was a positive staff ethos, where staff worked and communicated respectfully with each other as a team.

## 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?	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?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 1.1: Nurturing care and support.

Children were mostly supported to feel safe, valued and respected by sensitive staff. Experienced staff had built meaningful relationships with children and families, which had helped foster positive relationships with children. All children had personal plans in place and parents confirmed that they had been involved in developing and reviewing these with staff. The plans included children's individual likes, dislikes and information about their care routines. Meaningful personal planning for children promoted continuity of care between the home and setting. Parents responding to our survey believed they had a strong connection with staff and their children were well cared for. Their comments included, "My child LOVES the staff, that's good enough for me" and "All staff know my child well and this helps her settle into nursery when she struggles to be away from me. My child's key worker has a good bond with her and she will often put a picture of her on parent zone of her happily playing to help ease my worries if she has been upset when getting dropped off".

Effective systems were in place to support children with additional support needs. These included examples of joint working with external agencies to support the best outcomes for children. One educational psychologist told us there was good communication with the setting, they commented "Staff are highly skilled and able to adapt the support they offer to children depending on their needs. Staff take time and care to plan for each individual child and ensure appropriate strategies are in place for individual children and that all staff are aware of what strategies to use with each child".

Personal plans had the potential to ensure staff caring for children had a clear overview of their individual needs. However, we observed some instances where these had not been followed, such as making children's preferred comforters available. Children's personal plans were regularly audited by the management team to check the consistency in approach across the team and robustness of information. We encouraged the management team to support staff in ensuring any new information, that parents have shared about their child, is promptly updated within personal plans. These preferences should be appropriately shared with all staff caring for children involved. This would help support less experienced staff to familiarise themselves with children's individual needs, therefore contributing to children's wellbeing.

We acknowledged the challenges of a high number of babies registering and settling within the setting at the same time. To help support responsive care we signposted management and staff to Scottish Government's 'Voice of the Infant: best practice guidelines and infant pledge'. This guidance will help staff interpret young children's feelings, ideas and preferences through body language and vocalisations. Management agreed that the guidance would sit well with the setting's improvement priority of understanding attachment and implementing in practice.

Appropriate systems for recording children's medication were in place, including parental consent, storage information and administration records. We made suggestions to management for clarifying details where children's medication was to be administered 'as required'. This would ensure children's medication was administered safely, in line with prescribed instructions. It was good practice that, when needed, staff had

participated in additional training to support children's medical needs, such as the monitoring of blood sugar. This contributed to children's health and safety.

Children's welfare and wellbeing were safeguarded as staff participated in annual child protection training. Raising awareness of the importance of child protection was part of the induction programme for new staff. A strength of the service was the work with children around Care Inspectorate's SIMOA campaign. Older children were taking it in turns to take the SIMOA elephant home and bring back photographs of the activities they had shared. This had enabled children to naturally chat with staff about potential dangers around them and how they kept themselves safe. The SIMOA campaign (Keeping Children Safe - Look, Think, Act) helps keep children safe by raising awareness of how, and why, they could leave a childcare setting without a responsible adult.

### **Quality Indicator 1.3: Play and learning.**

Children were having fun. They could choose from a good range of toys, jigsaws, games, books, and craft materials, which were easily accessible at child height. Each playroom had a varied range of loose parts and creative approaches that at times engaged children's interest and enriched their play and learning. 'Loose parts' are materials with no fixed purpose that can be moved and manipulated by children as they learn to problem solve at their own pace. For example, sensory exploration of playdough and soil build strong connections in the brain and help children self-regulate. Some resources were in the process of being reinstated as they had been removed the previous term to meet the needs and abilities of children attending. We noted that books could be refreshed as some were getting tatty. When replacing books and other resources, staff should consider offering more representation of diversity. This will help children learn about people of different abilities and from different cultural backgrounds. In this way valuing inclusion and equality will have been introduced to them from an early age.

Children's comments about their favourite play pastimes included, "I'm reading this story, can you see the reindeer?" , "I like the mud kitchen best- here it is!" and "Playing with my friends , playing with everything messy and lovely time with my teachers and having fun. It's really good. I like going to the forest and reading the Gruffalo."

Staff offered a good balance of adult and child led activities. They encouraged children to be independent and make choices about where they wanted to play, what and who with. We observed some instances where staff supported children's higher order thinking skills through their conversational style. For example, one member of staff within the three to five playroom sat on the floor playing guitar beside a small group of children , encouraging them to choose an instrument and sing along. Children's literacy and new language was supported as the member of staff chatted about which musical terms the children remembered for volume and speed, such as 'forte' 'piano' and 'tempo'.

Parents responding to our survey confirmed that they were welcomed into the service and had the opportunity to discuss their child's care, play and learning. Parents found value in coming to stay and play sessions where they could find out how children spent their day. We could see from displays that staff recognised and celebrated children's achievements from home, so that there was an holistic approach to children's learning and progress. Parents comments about the availability of interesting and fun play experiences for their children included, "I think the nursery do a pretty decent job with activities, they've made food together, they've spent time at the local park, they've been on the train, and the nursery rooms have quite a few different play stations and the kids seem quite engaged" and "Forest schools, learning about different types of families, learning about taking care of self, about babies, and emotions. Literacy, creative and sensory experiences".

The manager and staff team had identified within the service improvement plan the need to continue to embed the curiosity approach to children's play and learning. They were keen to engage less experienced staff in professional development activities to support their understanding of the approach theory, and develop their skills. The curiosity approach surrounds children with open ended materials that ignites their natural curiosity and imagination. Empowering children to lead their own learning builds their confidence, critical thinking, and problem solving skills.

## How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 2.2: Children experience high quality facilities.

The setting was comfortable, spacious, well ventilated, and furnished to a good standard. The setting activities, illustrated by children's mark making and photographs, were displayed throughout the service promoting children's sense of belonging. Other displays kept families informed about the life and work of the service. This made everyone feel welcome and included. We encouraged management to regularly audit displays to ensure the currency of information.

Playrooms and children's play spaces took consideration of their abilities, stage of development and learning. This included cosy spaces where children could rest or sleep, when needed, therefore supporting their emotional wellbeing. While background music was sometimes played to create a homely environment within the baby room, we discussed how reducing volume and speaking quietly would support children who were unsettled. Introducing more soft furnishings could also help children to explore their environment without being over stimulated.

Children's opportunities for play and learning were enhanced through strong connections to the wider community, such as visits to the local care home. Children from the two to three and three to five playrooms participated in blocks of forest school experiences within local wooded areas. This meant children were able to engage in risky play whilst making connections with nature. From reviewing related plans and displays, we could see that children were developing life skills as they negotiated and explored the forest space. Both staff and parents spoke highly about these experiences.

There was a range of safety measures within the setting to help keep children safe. For example, a secure entry system and appropriate arrangements for maintenance. We particularly liked that staff had introduced risk assessments with older children so that they could develop analytical skills in making safe decisions. This meant they were taking responsibility for their own safety as well as that of their friends. The robustness of formal risk assessments for different areas and activities varied. In particular, we discussed how staff monitored the safety of children as they made the transition from indoors to outdoors, as well as when they were playing outdoors. This is to ensure children's wellbeing and safety needs are not compromised. **(See area for improvement 1.)**

At our last inspection we had made suggestions for how the nappy changing unit in the baby room could be further improved to support the health and safety of children. Nappy changing guidance had been updated since the setting was registered and the service provider should consider incorporating good practice within the setting.

We reminded them that the document 'Nappy changing facilities for early learning and childcare services: information to support improvement' could be found on the HUB area of the Care Inspectorate website.

### Areas for improvement

1. Children's wellbeing and safety should be supported through the management team working with staff to implement a consistent format for risk assessments.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS), which state that: 'My environment is secure and safe' (HSCS 5.19).

### How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

#### Quality Indicator 3.1: Quality assurance and improvement are led well.

The service had a clear management structure, where in addition to the manager there were playroom leaders and the service provider's support and development manager. The service was in partnership with South Lanarkshire Council and therefore had access to their improvement plan templates and quality improvement officer support. Quality assurance processes included a monitoring calendar and staff mentoring programme, to ensure children always experienced good outcomes. Since the last inspection, the service manager had been vigilant about adhering to the conditions of registration of the service, notifying the Care Inspectorate of specific events, and providing supplementary information when requested. Driving forward new processes had impacted positively on children but we acknowledged that it had also meant that some areas for development had been held back.

The management team had involved staff in the self evaluation of the service, which had helped make the improvement priorities meaningful to them. For example a display highlighted how staff had reflected on the quality of children's outdoor learning experiences and how these could be further enhanced. Staff had referred to both local and national guidance, such as 'Out to Play', to consider how best to support children to achieve. Involving staff in self evaluation contributed to their feeling of ownership of the service improvement journey.

Staff had annual appraisals, monthly reviews and participated in peer reviews with colleagues. This meant they were able to discuss their professional development as well as receiving personal support. Staff we spoke to as well as those responding to our survey, agreed that their wellbeing needs were recognised and supported by leaders.

Parent and family involvement was also important to the setting. Parents could participate in the parent council, which made suggestions for future service development and questionnaires were regularly distributed to parents. There was a 'question of the month' regarding the quality of different aspects of the service, displayed on the family noticeboard. We could see that management responses to parents' perspectives were published in newsletters. This meant people could see that their suggestions were listened to and acted upon where possible. It contributed to everyone feeling valued and respected.

Parents responding to our survey mostly agreed that they and their child were involved in a meaningful way to help develop the service. Comments included, "Facebook group which questions are asked often as well as emails looking for opinions or ideas on how to improve the service and to review and comment on policies, I like this as well as the opportunity to submit anonymously on the board in the nursery itself" and "(my child) has also been involved in telling her teachers what she is interested in and wants to play with at nursery". Involving parents in decisions about the setting contributed to them feeling respected, and made it more likely that any developments were relevant to their families' needs.

The management team and staff engaged well during the inspection process. They provided additional evidence taking on advice and support, which demonstrated their commitment to improvement.

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator 4.3: Staff deployment.

Sampling the provider's recruitment procedures gave us reassurance that staff had been safely recruited and there were systems to support their practice. We spoke with the most recent recruits who told us they felt welcomed and very well supported by the team. They had been given the time and space to become familiar with their role and responsibilities, including the policies and procedures that contributed to high-quality outcomes for children.

A few staff responding to our survey felt that staff absence, due to sickness or leave, had impacted on their ability to fully meet children's needs. One parent had also commented that occasionally activities could not run due to staff illness. During our visit there was not always the right number of staff with sufficient time and appropriate skills to meet the needs of the children present. We advised management to remind the team that how playrooms are staffed should not be determined solely by minimum recommended adult to child ratios. Staff should be able to take the initiative to consider the individual needs of the children present and what support they might need. For example, when new children are first settling into their playroom or during children's lunch time, when children would benefit from there being sufficient staff to sit with them and model social skills. This would provide children with a more responsive, nurturing experience.

We acknowledged that most of the time we had observed that effective staff communication supported children's comfort and wellbeing. Staff moved naturally in response to where children wished to play and signalled to each other where they felt children might need closer supervision to support their safety. This helped ensure children's experience across the whole day was positive, and that they were safe.

Most of the parents who responded to our survey believed there was usually the right number of staff with the capacity to support their children. Their comments about the professionalism of staff included, "My relationship with staff is professional. Staff members are generally very friendly and they've always taken any requirements I had on board" and "The staff are excellent and provide great updates on my son's well being. They are extremely attentive and go out of their way to care for my son and ensure our needs as a parent are met".



One of the external professionals, who worked with staff within the setting, agreed with these sentiments. They fed back "Staff appear to be forward thinking, creative and flexible when it comes to support children. From my experiences, it is apparent staff have strong relationships with the families that they work with.

In meetings, it is always clear that parents/carers feel comfortable in the setting and with the staff. Staff at happy feet are open and transparent with parents but do so in a very sensitive manner".

Displays of staff photographs and minibiographies helped families get to know who would be caring for their children. It demonstrated the balance of skills and experience across the team, and how staff were regulated. Staff caring for children were registered with the Scottish Social Services Council, which is the regulatory body responsible for registering the social care workforce. They provide public protection by promoting high standards of conduct and practice and support the professional development of those registered with them.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## 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?	4 - Good
4.3 Staff deployment	4 - Good

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