

# St. Mary's Nursery Class Day Care of Children

Liddel Road Cumbernauld Glasgow G67 1JB

Telephone: 01236 794 828

Type of inspection:

Unannounced

Completed on:

19 June 2024

Service provided by:

North Lanarkshire Council

Service no:

CS2003015392

Service provider number:

SP2003000237



## About the service

St. Mary's Nursery Class is provided by North Lanarkshire Council. It is situated within St. Mary's Primary School in Cumbernauld, North Lanarkshire and is registered to provide a care service to a maximum of 50 children, at any one time, aged from three years to those not yet attending primary school.

Children have exclusive use of two playrooms, outdoor play area, cloakroom and toilets.

## About the inspection

This was an unannounced inspection which took place on 17 and 18 June 2024, with feedback being provided to the service on 19 June 2024.

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 a small number of children using the service
- gathered the feedback from ten family members of children using the service
- spoke with staff and management present on the days we visited the service
- · gathered feedback from five staff using a questionnaire
- observed staff practice and children's experiences
- · reviewed documents.

## Key messages

- · Children were familiar with the daily routine and were engaged in their play and learning.
- Snack times were a positive experience for the children, however lunch times needed to improve.
- Children had access to an outdoor play area, however, this needed to be improved. It was unloved and provided limited learning experiences.
- The provider needs to audit the quality and nutritional value of the foods being offered at lunch time. This is to ensure they are healthy and nutritious.
- Leaders had a good understanding of how well the service was doing. They had a plan in place to priorities improvements needed.

## 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 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 had made close friendships and were familiar with the daily routines. They were confident within the setting and interactions between children and staff were respectful and caring. Children had ownership within the service, with some children able to share their experiences with the inspector. They told us they liked coming and playing with their friends. They really liked painting, playing in the water and building with the large building blocks.

Staff were skilled at listening and responding to the children's needs. Comfort and reassurance was given, when needed. Staff recognised the need to provide a nurturing environment and used language that children understood.

The six principles of a nurture were being promoted. However, the staff discussed plans to further embed these into practice. Recognising the significance of transitions for children and families could be further enhanced. Parents told us relationships with staff could be improved, with some parents sharing they had positive interactions with staff but others that they had limited or unsatisfactory interactions. Welcoming families into the service at drop off and collections, would promote a more family centred culture. More information can be found on the care inspectorate hub in the 'Me, my family and my childcare setting' practice note.

Children's morning and afternoon snacks were relaxed and unhurried. Children chose when and where they wanted to have their snack. They could have it inside or out in the garden. Children were able to self-serve and helped with the clearing up. Lunchtimes required improvement. It was a busy, loud and haphazard time of day. Children's involvement in preparation was limited and they had no input to the menu. If children did not like the food offered there were no alternative options, resulting in a few children not having lunch. The lunchtimes needed to become part of the daily routine not solely a task. More information can be found on mealtimes on the care inspectorate hub in the keeping child safe practice notes section. We have made an area for improvement around the quality of food under the quality indicator 3.1 quality assurance and improvement are led well.

The service was at the early stages of implementing changes to how they planned children's play and learning experiences. Changes within the staffing team had delayed progress. Staff had undergone training and were gaining confidence, however further development was planned. The recording of information in children's personal plans and learning journals was included within this. Although some improvements had been made to the personal plans since the last inspection, we have repeated this area for improvement. This is to ensure that when staff planned children's care, play and learning it reflects what matters to them (see area for improvement 1).

Quality Indicator 1.3 Play and learning

Children enjoyed learning and exploring how things worked and being creative. The indoor play spaces were well planned and provided children with good access to a wide range of materials. Staff had planned play experiences in response to children's interests. For example, creating more space for children to play with the large building blocks and increased the range of imaginary play materials.

The outdoor learning opportunities needed improved. For children choosing to play outside, better access to materials is needed. The outdoor areas should provide high quality play and learning experiences that extend children's thinking and natural curiosity to learn. We have made an area for improvement under quality indicator 2.2 Children experience high quality facilities.

Children were provided good opportunities to develop their early literacy and numeracy skills. The service had tracked and monitored children's progress, children were making good progress. The leaders shared the plans to further develop how they planned to support children's learning and development. This included implementation of the focused child planning and increased staff knowledge and understanding of children development.

Parents had mixed views on how well they had been involved in their child's care, play and learning. Some were positive and some not so much. We discussed were improvements could be made. For example, more personalised comments being shared in the learning journals, increased parental involvement when setting children's wellbeing and learning targets. The service recognised where improvements could be made to address parental involvement, they agreed to consult further with families to ensure their concerns were addressed.

The service were working to have a more child led, play based curriculum. Leaders had plans to implement this further when they returned after the summer holidays. We asked them to consider the daily routine and to further support staff delivery of this. For example, to reduce the time children's play and learning was interrupted to come together before and after lunch. The agreed to include this in the plans for the new term.

#### Areas for improvement

1. To support children's wellbeing, learning and development, the provider should ensure that each child's personal plan identifies their needs and how these will be met. This should include, but not be limited to, a clear plan on how the service plans to support children's individual needs and preferences.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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).

## 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

The service provided good play experiences for the children and was maintained to a satisfactory level. The building was secure, both at the entrance and the door leading into the school building. We have made an area for improvement on the safety of children accessing the garden (see area for improvement 1).

As previously mentioned earlier in the report, the inside play and learning facilities were well designed and provided good quality play and learning experiences. Children independently accessed materials. For example, children could select from art materials as they were available on open shelves and in easily accessible storage boxes. Children's views had been considered and influenced the playrooms layout. Children had access to different types of play spaces. They enjoyed the large sofa, cosy corners and soft furnishings, the spacious block area and designated water play resources.

Plans were in place to make changes to the facilities, due to the reduction in numbers of children being cared for and staff. We agree that, when these changes were implemented, most areas we have discussed for further development will be addressed. It was agreed it would be beneficial to consult with the children and families before changes were made. This will ensure that areas that worked well are not lost, especially through the eyes of the children who will be returning in the new term.

The facilities used for lunchtime, needs to be improved. The service had intentions to bring lunchtime into the playrooms, similar to the snack time. This would reduce the number of transitions for children and allow them to have lunch in a more child centred environment.

The outdoor play area was in need of a refurbishment. We were informed they had some new resources and hoped to have them installed soon. The outdoor area was not well maintained, it was unloved, untidy and most resources were in need of a clean. The surface for under the more risk play materials was scattered all over the outside area. This created a uneven surface and looked extremely untidy. In addition, the main gate to enter and exit the garden area needed to be secured. The outdoor space and materials should be given the same focus as the inside areas. Children did have snacks outside, improvements could be made to have a more permanent, all year round, snack area that includes hand washing facilities (see area for improvement 1).

The new design and use of the the play spaces due to be implemented was a good opportunity to enhance areas that worked well and make improvements needed. They service was looking forward to implementing the plans.

#### Areas for improvement

1. To support children's wellbeing, learning and development, the provide should ensure that the outdoor play area provides high quality play and learning experiences and are well maintained and secured. This should include, but not be limited to, having a secured perimeter and children have access to high quality materials that inspire their imagination, curiosity and thinking.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'My environment is secure and safe.' (HSCS 5.19) and 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.24).

## 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

Leaders had a good understanding of the service strengths and clear plans to further develop the quality of service provided. The service planned to implement these positive changes when the new term begins. The main changes included a new staff structure, new playroom design and further implementation of a play based curriculum. We discussed involving families, staff and children in these plans will be key to building positive relationships and ensuring those receiving the service expectations are met and considered.

The changes within the staff restructure will require a strong team, time to bond and agree a shared vision. For new staff, a meaningful induction and mentoring systems will be needed. Leaders had identified staff training and development needs and were fully aware of the support needed to implement their plans.

Quality assurance systems were in place, this included internal and external systems. Leaders were looking forward to the new term to start implementing their changes to further enhance the service. We agreed and found most area we discussed were included the the service plans for improvement.

We did identify the quality of foods being provided at lunchtime needed to be investigated to ensure met the needs of the children. On the first day of the inspection no fruit or vegetables were served as part of the main meal, hamburger and wedges with tomato sauce. Day two a second course was provided, a large piece of shortbread, sprinkled with sugar. In addition, for children who did not like the food offered, no alternative was available, resulting in a few children not eating much, if any. We have asked the provider to undertake an audit of the foods being provided to ensure they met the needs of the children (see area for improvement 1).

#### Areas for improvement

1. To support children's wellbeing, learning and development, the provide should ensure that children can choose from suitably presented heathy foods. This should include, but not be limited to, fruit and vegetables being included as part of their in main meals and children being involved the menu planning.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning' (HSCS 1.33)

## How good is our staff team?

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 4.3 Staff deployment

All staff were well positioned during our observations, they spoke to each other to ensure they were informed about were they were needed to support the daily routine and children's needs.

At the last inspection it was recommended to ensure children receive high quality care, support and early learning experiences, staff should be supported to access professional training and development opportunities. After speaking to staff, we agreed this had been met. However, when the changes in the staff structure takes effect, it will be key to ensure the new team have a shared vision and values. Staff suggested a more detailed staff induction pack and mentor systems would help new staff feel more welcomed and informed. We agreed.

We are aware that throughout the year staffing has been a challenge due to absence, however been informed that adult to child ratios were maintained. Staff absences had impacted on the consistency and continuity of care for the children and families. Parents views on relationships with staff were varied. Some strongly agreed they had a strong bond, whist a few disagreed. Comments included "Staff are very warm and friendly. My child has progressed so well during the year. Staff always on hand to help. Journals updated regularly whilst another said 'Lack of communication from staff, only once a year for progression/development/update on child, not very welcoming, feel many staff are unapproachable.' Children and families should know staff caring from them and have positive relationships.

The ongoing changes within the staff had limited the progress of the service improvement plan, some priorities had been delayed. The provider needs to ensure arrangements for staff absence, whether planned or unplanned, are managed well to minimise the disruption to quality of the service.

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 health and wellbeing, management and staff should ensure each child has a written plan that demonstrates how their needs will be met.

The following areas should be considered:

- Ensuring information about children is kept together or signposted to where additional information can be found.
- Transition arrangements for new children are recorded.
- Ensuring children's needs feature clearly in their plan and how staff plan to support their needs.
- Ensuring plans contain meaningful observations and clearly demonstrate children's progress and achievements.
- Ensuring effective systems are in place to track children's learning.
- Where children require medication, clear information about signs, symptoms, triggers and actions should consistently be recorded.
- Where children require additional support a personal risk assessment should be considered.

- Children (where appropriate) and parents/carers should be meaningfully involved in contributing to plans and reviewing these regularly.

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)

This area for improvement was made on 31 January 2019.

#### Action taken since then

Each child had a personal plans in place. For children with specific needs we found meaningful personal plans to be in place and were kept up to date. However, after sampling a few children in different groups and considering the information known about the children, we concluded they still needed further development.

The information we sampled needed better consistency in the quality of recordings, more personalisation to reflect individual children's needs and preferences and clearer plans in how staff planned to support these. The service agreed that more attention could be place to ensure children's voices were included.

As a result, we have repeated the area for improvement. It has been reworded to reflect progress made and findings at this inspection. This area for improvement has not been met and has been repeated.

#### Previous area for improvement 2

To ensure children receive high quality care, support and early learning experiences, staff should be supported, to access professional training and development opportunities.

This should include:

- Ensuring staff who are responsible for food preparation and cooking have accessed appropriate training
- Ensuring staff risk assess children's play areas effectively
- Staff access relevant training to support children's learning and development
- Staff engage in a meaningful professional review and development programme.

This ensures care and support is consistent with the Health and Social Care Standards, which state that '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).

This area for improvement was made on 31 January 2019.

#### Action taken since then

The staff told us since the last inspection they had accessed training and development and had professional review meetings to discuss their needs. There had been changes in staffing. The staff present at the inspection confirmed they had training opportunities on play and learning, food hygiene, child protection and completed their mandatory training. Staff talked about their learning and the impact on the quality of the service provided.

Further changes to the staffing were planned for the new term. The service was fully aware that staff training and development would be key to building positive bonds. The provider informed us that they have a plan to support the staff team, this will include appropriate induction training and further development for all staff.

As a result, this area for improvement had 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	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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