

Castlebay Primary Nursery Day Care of Children

Castlebay Children's Centre
Castlebay
Isle of Barra
HS9 5XL

Telephone: 01871 810 983

Type of inspection:
Unannounced

Completed on:
20 August 2024

Service provided by:
Comhairle Nan Eilean Siar

Service provider number:
SP2003002104

Service no:
CS2005106314

About the service

Castlebay Primary Nursery is a day care of children service and is registered to provide care and education to a maximum of 37 children from the age of two years to primary school age. The service is on the island of Barra.

Parents had a choice of placing children in Gaelic Medium or English Medium in the centre. The service provides pre-school education in partnership with Comhairle nan Eilean Siar.

The service is provided in the purpose-built Children's Centre which was on the opposite side of the road to the school. There were two playrooms, children's toilet area and a dedicated kitchen.

About the inspection

This was an unannounced inspection which took place on 19 and 20 August 2024. 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.

During the inspection we:

- spoke with children using the service
- received electronic feedback from 13 parents/carers
- spoke with staff and the management team
- received electronic feedback from four staff
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy, secure and loved in the service.
- Improvements had been made to the safety and security of the outdoor play space.
- Improvements had been made to the quality of the learning environment, including resources.
- The service had experienced challenges recruiting qualified and experienced staff on their small island community.
- The managers time had not been protected to enable robust quality assurance and self evaluation to be carried out as planned.

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?	3 - Adequate
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/people and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children were happy, confident and secure at nursery. The warm, nurturing staff welcomed and settled children into the setting on their arrival. It was clear that children and staff had developed close, respectful relationships.

Relationships had been built between children, we could see where close friendships had been fostered. Staff encouraged children to be friends and be respectful of each other. We observed children playing and supporting each other. This helped to make children feel happy and secure.

Staff knew children well. They could confidently tell us about children's individual needs as well as their particular likes, dislikes and interests. Although each child had a personal plan, we found inconsistencies in how they were used and completed. For example we sampled some where strategies to support children had been recorded as well as how children were responding to strategies. However, we sampled some where staff could describe strategies they used to support children but these were not recorded in children's personal plans. This meant that the plans did not fully reflect the support that individual children required. We had previously made an area for improvement around personal plans in May 2023. We concluded that this area for improvement had not been met and has been repeated below.

Staff were aware of children with medical conditions, including dietary intolerances and allergies. Where children required medication this was stored and administered safely in the service. Appropriate information had been gathered from parents to ensure that children received the correct dosage of medication at the right time.

The head of school and manager of the service worked hard to ensure nursery children were part of the school. As such children had access to areas within the school that supported their development. Children enjoyed lunch in the school dining hall. We accompanied children over to the school. Children told us that they enjoyed going over to the school, and said that sometimes they saw their siblings there. Having the opportunity to spend time in the school and see their siblings contributed to smooth transitions when it came time for the children to move to the school and contributed to children's feeling of happiness and security.

Lunchtime was a pleasant sociable experience for children. Children were very confident collecting their lunch and carrying their tray to the table. Staff supported children to make good choices and helped them with their lunch if required. Staff sat, ate and chatted to children in a relaxed way over lunchtime. Lunchtime was a calm and unhurried experience for children.

Quality indicator 1.3: Play and learning

There were opportunities for children to play and have fun. They had access to a variety of resources both indoors and outdoors. Core resources were available in both the English and Gaelic playrooms. For example, sand, water, paint and playdough. Staff had recently carried out an audit of the play environments, and, as a result had reviewed and developed areas and the use of more natural resources which increased children's curiosity and creativity. Most children were involved in their play and enjoyed exploring and investigating both indoors and outside.

Play experiences indoors and outdoors provided opportunities for children to develop their skills in language, literacy and numeracy. Children were playing in the water and discussions were taking place of sea creatures and the coast. Children were joining in imaginative play of hospitals and using the resources available to extend and support their play. We observed staff enabling children to use their imagination and enhance their learning through skilful questioning. All the parents and carers who provided feedback told us that their child's development was always supported through interesting and fun play experiences. Some of their comments included:

"She has experiences that feel fun, positive and gives her more confidence. This has really helped with her social skills."

"The staff are so enthusiastic and helpful. Very creative in the children's range of topic and learning."

"I think the staff know her well and as a result is happy, confident and comfortable in the nursery setting. Her gaidhlig language development is progressing well."

Staff shared with us how they were developing their current approaches to planning for children. A more responsive approach to planning took account of children's interests and supported children to be more involved in their learning. A staff member had attended "Planning in the moment" training and was supporting the staff team in using this approach. Overall the staff team recognised the positive impact in the new planning approach and were positive about using it to improve outcomes for children.

Staff recorded the types of experiences children were involved in at nursery on an online digital platform, which parents and carers had access to. We sampled some of the children's learning journals on the digital platform. We saw that information within these varied across the staff team. There were differences in staff skills in the recording of observations, and there were discrepancies in how often this happened. In order to track and monitor children's needs and progress the manager should ensure that staff are supported to observe, monitor and track children's learning and that progress and planned next steps are recorded and monitored.

Areas for improvement

1. To support children's health, welfare and safety needs the manager and staff should ensure individualised personal plans are sufficiently detailed to include but not be limited to identified next steps in learning and strategies to support individual children.

They should ensure plans are relevant and updated at least every six months or before if required along with children and parents' views.

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 a 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

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

Quality indicator 2.2: Children experience high quality facilities

Children were cared for in an environment that was secure, clean, bright, and welcoming. The provider had invested and made improvements to support children's safety and security which included the installation of an outdoor perimeter fence. The safety and security of children, particularly outdoors had been highlighted at our last inspection when we made a requirement that improvements be made. We were satisfied about the measures that had been taken to safeguard and protect children.

Staff were aware of, and considerate of the potential risks within the service, for individual children and outdoors. Where staff felt necessary individual risk assessments had been carried out for individual children. Additionally robust risk assessments had been reviewed and developed for both indoors and outdoors. This helped to keep children safe.

Staff training and research around high quality environments had led to improved outcomes for children. Playrooms had been carefully planned to ensure breadth and balance of resources which met children's interests. More natural resources provoked children's curiosity. In both playrooms we observed children exploring, being curious and using their imagination.

Improvements had been made to the playroom environments. The use of soft furnishings, such as sofas, rugs and cushions as well as soft lighting had created a calm and nurturing environment. We observed children relaxing and taking time to chill out in the comfy spaces that had been developed. The homely, nurturing environment supported children to feel relaxed and secure.

The service made good use of facilities within their local community. Children enjoyed trips to places such as the forest, swimming pool, local beaches and playparks. Parents and carers were very positive about the types of activities their children enjoyed in the local community. Some of their comments included:

"Great use of outdoor learning - forest walks, local walks, beach walks, all kinds nature settings"
and "Visits/trips out within the community. Such as walks to the park, post office and local businesses."

We highlighted some potential infection control issues within the playrooms. More attention needs to be paid to ensure that staff and children carry out effective handwashing practices, especially before and after eating, playing outdoors and after personal care. In addition to this we observed staff washing snack dishes in a communal, multipurpose sink. Staff should ensure that dishes are washed hygienically in the sink available in the kitchen area.

Areas for improvement

1. To minimise the risk of infection spreading the manager should ensure that at a minimum;
 - a) Snack dishes are washed hygienically in the kitchen area.
 - b) Staff monitor and support children to wash their hands routinely and effectively.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

"I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

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

Throughout the inspection the management team and staff were open, honest, and reflective on their journey. They were keen to be involved in the inspection process. The team had some opportunities to reflect and identify the improvements required for the service to move forward in a positive way for the children, families, and staff, with a focus on delivering the best outcomes for children and families.

Staff had developed positive relationships and effective communication with parents and carers. The service provided an open door approach to welcoming children and families into the service. They recognised the value of involving and including parents and carers in the setting. Parents and carers were kept up to date with what was going on in the school and the Sgoil Araich through regular newsletters and updates on the digital platform. To support children's learning, parents and carers were invited to attend stays and play sessions. Most parents and carers who provided feedback strongly agreed or agreed that they and their child were involved in a meaningful way to help develop the service. Some of their comments included:

"Staff always willing to discuss progress and will update me regularly of what my child has been doing/ learning regularly at pick up/drop off. Invited into stay and play sessions and learning appointments/ progress reporting."

"Invited regularly for stay and plays."

"It's great going in for stay and play sessions and seeing how my child is getting on."

The manager had a monitoring and auditing calendar in place which highlighted planned areas and aspects for auditing. Whilst the manager was keen to carry out regular monitoring and auditing of staff practice and the service as a whole they had been unable to carry this out as robustly as planned due to staff shortages. For several months the manager had been required to support staff and care for children in the playrooms. Although the managers response had impacted on how quality assurance was carried out, their actions highlighted that children were at the heart of the service, and their health, safety and well being was a priority to all.

The service had support from an early years support officer from the local authority. The support officer visited the service, shared best practice and ensured that any training, best practice and local authority initiatives and strategies were shared. This helped to keep the manager and staff team up to date and informed.

How good is our staff team?

3 - Adequate

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

Quality indicator 4.3: Staff deployment

Staff were friendly, welcoming and willing to engage with the inspection process. The service had undergone a number of staff changes recently, however, staff told us that they were gelling as a team and worked well together. Regular opportunities for room and staff meetings gave staff the opportunity to get to know each other, share ideas and discuss individual children and the service as a whole. Parents and carers who provided feedback commented positively about the staff and their relationships with them and their children. Some of their comments included:

"The staff are all welcoming, loving and kind towards the children." and "The staff have always been super supportive in all aspects of my child's well-being and keeping me in the loop of all things going on."

The service had recently undergone several staff changes. They had experienced difficulties recruiting qualified staff, particularly those with a fluent understanding of Gaelic. Parents and carers were informed of staff changes. This meant that they could prepare their children for who would be looking after them. Parents and carers recognised the challenges the service was facing in recruiting new staff. Some of their comments included:

"Staffing is hard for the nursery overall but two staff play a big part in my child's development. Most of the time one of them are in the environment."

"There obviously has been issues with staffing recently with maternity leaves and people leaving but staffing numbers are always maintained through use of relief staff or redeployment of other staff."

While staffing levels met the minimum requirements we noted that more than 50 percent of staff employed in the service to support and plan for children were unqualified and going through training and modern apprentice programmes. Whilst we observed most staff to be motivated and enthusiastic about their work the high level of unqualified staff meant that there was a range of skills and experience within the team. The provider should consider the amount of modern apprentices employed in the setting at any one time. They need to consider the differing knowledge, skills and experience of staff when making deployment decisions. (See area for improvement).

Areas for improvement

1. The provider should at a minimum:

- a) Ensure that there are, at all times, staff present that have the skills to meet the care, welfare, support and safety needs of children.
- b) Address the balance of qualified and unqualified workers.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 3.11)

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

Requirements

Requirement 1

By 10 June 2023, the provider must ensure that children are cared for in an environment that is safe and secure.

To do this, the provider must, at a minimum, ensure:

- a. Risks posed by opportunities to leave the garden area unaccompanied are removed.
- b. Staff are aware of where children are at all times.
- c. Robust risk assessments of the outdoor area are carried out and used effectively.

This requirement was made on 25 May 2023.

Action taken on previous requirement

The service provided photographic evidence that an additional perimeter fence had been built prior to our inspection. During our visit we saw the fence and noted that resources had been removed from the perimeter of the garden. An updated risk assessment for the garden had been developed which staff were aware of and adhering to.

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

To support children's health, welfare and safety needs the manager and staff should ensure individualised personal plans are sufficiently detailed to include but not be limited to identified next steps in learning and strategies to support individual children. They should ensure plans are relevant and updated at least every six months or before if required along with children and parents' views.

This area for improvement was made on 25 May 2023.

Action taken since then

There were still some inconsistencies in personal planning approaches. We saw that some had clear strategies recorded and others that had not been updated. Learning journals informed parents of experiences children had been involved in. They did not identify next steps in learning. We have therefore concluded that this area for improvement had not been met and have repeated it.

Previous area for improvement 2

The management team should review, update and implement the service's medication procedures, ensuring these reflect best practice guidance.

This should include:

- Recording clear information about children's medical conditions and how medication has to be administered. This should include any triggers, signs, symptoms and actions to be taken by staff.
- Ensuring prescribed medication has the appropriate dispensing labels.
- Ensuring staff clarify the dose of medication with parents/carers, where this differs from the instructions.

This area for improvement was made on 25 May 2023.

Action taken since then

Recording of children's medical needs was clear. All medication contained prescription labels. Dosage instructions correlated with consent forms. We have therefore concluded that 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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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