

Summers Nursery @ Victoria Street Day Care of Children

44 Victoria Street
Aberdeen
AB10 1XA

Telephone: 01224 628 862

Type of inspection:
Unannounced

Completed on:
10 September 2024

Service provided by:
Summers Nursery Limited

Service provider number:
SP2003003231

Service no:
CS2006117995

About the service

Summers Nursery @ Victoria Street is situated in the centre of Aberdeen City.

The service is registered to provide a care service to a maximum of 65 children at any one time aged from birth to those not yet attending primary school of whom no more than 21 may be under two years of age.

The accommodation is over two floors, with an outside play area to the rear. Children aged two to 3 years and three to five years are cared for in two playrooms on the first floor. Babies are cared for in a large playroom on the ground floor with access to a designated sleep room.

About the inspection

This was an unannounced inspection which took place on 9 September 2024 between 09:30 and 17:10 and 10 September 2024 between 09:20 and 17:00.

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:

- spent time with children using the service
- received 29 responses to our request for feedback from parents and 10 from staff
- spoke with staff and management
- observed practice and children's experiences
- reviewed documents.

Key messages

- Children were cared for by staff who were generally nurturing and responsive.
- Staff knew children well.
- Children experienced a comfortable environment with developmentally appropriate play spaces. Work to further develop the environment was ongoing.
- The service had undergone a period, with a new manager being recruited in recent months.
- A culture of continuous improvement helped promote developments to provide children with positive experiences and outcomes.
- Staff skills and knowledge varied, resulting in some inconsistent experiences for children.
- Staff were being supported to develop skills and knowledge and fully understand their roles and responsibilities.

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. We identified several strengths, which impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children generally experienced nurturing, kind interactions. Most staff took time to listen and respond to children, helping to build positive, trusting relationships. Parents commented positively on staff's relationships with them and their children, and one child told us "I really like everyone being kind at nursery."

Children's overall wellbeing was supported by staff's knowledge of their needs. Personal plans were used to record important information about children. Some lacked detail about how children were being supported and could be developed further to ensure children's needs are consistently identified. Information was shared and updated with parents, however not always every six months in line with guidance.

Management shared plans to introduce regular parent meetings to further support information sharing to promote positive outcomes for children.

Children's mealtime experiences were managed safely. Staff sat with children throughout, and took appropriate actions such as encouraging children to take small mouthfuls to help reduce potential risk of choking. Staff were knowledgeable about children's allergies and how to cater for these to keep children safe and healthy.

Children had some opportunities to practice social skills and independence. These were not consistent across the setting, with some staff being more skilled at supporting children than others. This resulted in some missed opportunities, when staff did not respond positively to children's needs. During mealtimes the oldest children were encouraged to be independent, however these opportunities were not available to the toddlers and babies. We encouraged staff to develop age-appropriate opportunities for all children.

Management told us they were continuing to support staff to foster consistent practice across the team to help children achieve their potential.

Children's personal care was supported well. Staff treated children with respect and promoted their right to privacy when changing clothes and nappies. They understood that children had individual needs and adapted their practice to suit each child. For example, children slept when they needed to, and staff were mindful of parents' wishes at these times. This assured families that staff recognised the importance of individualised care for children.

Children's health and safety was promoted through the storage and administration of medication. Whereas recording of medication supported this, we identified some minor issues, such as reviews not being carried out often enough. Management acted on this immediately and amended practice to include three-monthly medication reviews in line with guidance, to fully ensure children's health and wellbeing.

Families had opportunities to become involved in the service, and they told us they were made to feel welcome. They were invited to events such as annual parent meetings and a family sports day.

Daily communication was supported through use of an app, which some parents felt could be used more effectively to provide them with regular information. Management had plans to roll out further opportunities to include parents, helping to build positive relationships and meaningful involvement for families in their children's care.

1.3 Play and Learning

Children had fun playing where and how they chose. They played with friends and older children enjoyed telling us proudly about their nursery. Staff supported children's games, however some opportunities to promote learning were missed when staff did not help children extend their thinking and ideas. This resulted in varied learning experiences for children.

Planning for children's learning varied across the setting. Regular observations of learning were shared with parents via an online platform, however some parents told us they would like to see more observations. Staff identified next steps for children, however, activities to help them achieve these were not always planned. Staff had been receiving training and support in this area, and some were more skilled than others. This meant that opportunities for planned individualised learning and depth of learning were sometimes missed. Management had plans to continue to support staff in this area to ensure consistently high-quality learning experiences for all children.

Children had opportunities to develop language, literacy and numeracy skills. They had access to books and the younger children benefitted from regular singing and stories throughout the day. Staff counted with children and spoke about colours. This could be further developed to ensure that opportunities are embedded throughout the environment and routines of the setting. Children in the pre-school room had planned group story and song times. During the inspection not all children engaged with these activities. When we discussed this with management, they agreed to review arrangements to support staff in delivering activities that provided all children with appropriate challenge and interest to support their learning.

All children had daily access to outdoors. Each room had timetabled sessions in the garden, and children regularly visited a nearby green space and went for walks. Children were able to choose whether to participate in some of their garden sessions and we encouraged management to explore whether free flow to outside could be established to more fully promote children's right to choice.

How good is our setting?

4 - Good

We evaluated this key question as good. We identified several strengths, which impacted positively on outcomes for children and clearly outweighed areas for improvement.

2.2 Children experience high quality facilities

Children benefitted from comfortable, inviting surroundings. Furnishings were of high quality, and there were spaces where children could rest and relax. Staff had worked together to upgrade the environment, with further improvement planned. These measures gave assurance that the staff team were committed to providing high quality experiences for children.

Children's play spaces were generally well-resourced, and parents were happy with the variety of opportunities available. Each room was set up to provide developmentally appropriate areas, where children could have fun. There was scope for further development.

For example, children had some access to real life resources and open-ended play resources, however these were limited. In the garden, in particular, children lacked opportunities for sensory and messy play. Management were aware of this, and we encouraged them to continue with their plans to develop resources further, to include loose parts such as guttering, cable reels, crates, sand and water to provide children with varied open ended and sensory play opportunities.

Children's sleep facilities met their needs. Babies slept in cots in a designated sleep room, where they were monitored regularly. Toddlers who needed a sleep did so on mats, and all children had their own bedding and comforters. This helped children feel secure as they slept and rested.

Some improvements were needed to changing facilities for the 2-3 age group. Changing mats on the floor of the changing room were being used and management had identified that this did not meet current guidance. They had recently purchased a changing unit, which was scheduled to arrive imminently at the time of inspection. Moving forward, this will provide children with suitable changing facilities that meet their needs and adhere to guidance.

Children were protected while they played. Staff were safety conscious, and followed risk assessments to ensure any potential hazards were reduced. Children were reminded of agreed actions, such as keeping bikes away from the swings, to help them stay safe. We encouraged staff to include children in risk assessing more fully to support them to learn how to identify and manage risk. Infection control procedures further protected children, and they were encouraged to wash hands at key times of the day. We observed some minor inconsistencies in staff practice in this area and management agreed to monitor infection, prevention and control procedures to maximise their effectiveness.

Security arrangements kept children safe throughout the building. Cameras at key points of the setting helped management monitor exits and the sleep room. Safety gates and locks were used to help prevent children gaining unsupervised access to the stairs. These measures helped provide a secure and safe environment for children.

How good is our leadership?

4 - Good

We evaluated this key question as good. We identified several strengths, which impacted positively on outcomes for children and clearly outweighed areas for improvement.

3.1 Quality assurance and improvement are led well

The service aims to provide a safe, happy and stimulating environment for children. This was evidenced in their practice, and these aims were displayed for parents and staff within the setting. Management acknowledged that the vision, values and aims had not been updated in some time. We encouraged them to consider the views of parents and children when they next do this to ensure that they reflect to views of all stakeholders.

The service had undergone a period of change, with a new manager being appointed within the past few months. Discussions with the management team assured us of a commitment to continuous improvement, and the manager had implemented new quality assurance processes. Although these were in the early stages, we could see where this had resulted in improved outcomes for children and families using the service. Quality assurance practices now need to become fully embedded and evaluated to assess their effectiveness in supporting high quality care and positive outcomes.

An improvement plan set out the vision for improvements to the service. These were relevant and achievable. The manager monitored and evaluated developments to ensure that positive outcomes had been achieved.

Children's experiences were evaluated using audits and performance monitoring. Quality assurance tasks were recorded on a calendar with clear roles and responsibilities. These had been delegated appropriately to include the whole staff team. This included staff auditing the learning environment to identify areas for improvement and evaluating each other's practice. This resulted in the beginnings of a robust and effective self-evaluation and quality assurance system to identify areas for improvement to promote positive outcomes for children.

Improvements to experiences for children were informed by feedback from families. Parents were asked for feedback in several ways, including annual questionnaires and a suggestions board. Most parents agreed that their feedback was valued, and we observed that parents' suggestions were taken forward to help develop children's experiences. This promoted respect and involvement. Children's views were gathered using floor books and evaluation of activities. We discussed that the next steps in gathering feedback would be to develop more formal ways of collecting and recording children's views. This will help all stakeholders be fully involved in developing the service.

How good is our staff team?

4 - Good

We evaluated this key question as good. We identified several strengths, which impacted positively on outcomes for children and clearly outweighed areas for improvement.

4.3 Staff deployment

Children were cared for by a staff team with a variety of skills and knowledge. There were sufficient staff to meet children's needs, and management were aware of where strengths lay and where staff needed support to develop skills. This enabled them to deploy staff effectively to make the most of skilled staff to support those with less experience. Where staff had been promoted, they were supported to develop confidence in their new roles. These measures were helping to develop a confident staff team.

Staff were encouraged to undertake training and professional learning. This included child protection, and staff were confident in telling us the procedures they would follow to promote children's welfare. The manager had identified areas for development with staff, and supported them to attend training, some of which was delivered in-house. We encouraged them to explore the possibility of making these events more frequent to maximise opportunities to support staff to develop new skills. This will help foster a culture of continuous professional development to assist staff in their roles and responsibilities.

Children's transitions were managed well. Settling-in sessions for children joining the service were flexible, and staff supported parents well. Staff told us they valued positive relationships with families. When children moved between rooms, transition information was made available to ensure that all staff were aware of their needs and preferences. Parents spoke highly of staff, and their commitment to caring for their children. This helped assure families that their children's needs were central to their care.

Consistency for children was promoted through effective planning of breaks and cover for absences. Staff breaks were staggered to minimise disruption, and a relief pool of staff provided familiarity for children.

Staff communicated well with each other and families.

Conversations with parents at drop off and collection times provided continuity between home and the setting. Staff used information from these conversations to support children entering the setting and with their routines throughout the day. They passed on relevant information to each other, and shared tasks to ensure that children's needs were being met.

Staff recruitment processes helped ensure a safe environment for children. Once recruited, staff underwent an induction where they were mentored and met regularly with management. Their progress was monitored to ensure they fully understood their roles and responsibilities. Staff told us they felt well supported and could ask managers for help when they needed it. The manager was aware of the Scottish Government's National Induction Resource and how to use this to support staff performance. These measures supported staff to develop their knowledge and understanding of their roles.

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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