

Blossom Day Nursery Day Care of Children

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Type of inspection:
Unannounced

Completed on:
30 August 2024

Service provided by:
Joan Finlayson trading as Blossom
Day Nursery

Service provider number:
SP2003002966

Service no:
CS2003012071

About the service

Blossom Day Nursery is registered to provide a care service to a maximum of 22 children at any one time, age from 0 to 8 years, of whom no more than 9 children may be less than 2 years of age. The numbers of children varied each day.

The service is situated in a residential area of Portobello in the city of Edinburgh. The service is close to local amenities including parks, shops, the library and the beach.

The accommodation comprises of one large playroom for older children with direct access to an enclosed garden. The main area of the garden is located above street level and is accessed via a ramp. The youngest children and babies have their own playroom, which includes a small outdoor area. There are also toilet facilities, a cloakroom and an office space within the building.

About the inspection

This was an unannounced follow up inspection which took place on Wednesday 28 August 2024 between 09:35 and 17:50. We returned to the service on Thursday 29 August 2024 between 10:30 and 15:20. The inspection was carried out by two inspectors from the Care Inspectorate. We focused on requirements and areas for improvement made at previous inspections.

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 their play and two parents onsite
 - received written feedback from one family
 - spoke with staff and management
 - observed practice and children's experiences
- reviewed documents.

Key messages

Two requirements were met and three requirements remained unmet. Quality assurance processes and improvement planning needed developed and embedded to ensure the quality of the service improved.

Children's health and wellbeing was supported through improvements to the management of medication.

Children's wellbeing was supported through improvements to personal planning approaches. Staff were more aware of children's needs and were developing ways to support children.

The provider must ensure staff are supported to develop the quality of children's experiences so that they have consistently positive opportunities for play and learning.

The provider should ensure children have access to a greater range of meaningful and stimulating play and learning experiences.

The provider must ensure the quality of the environment improves by taking action to address the ongoing maintenance and refurbishment needs of the service.

The provider must ensure that staff are supported to develop their skills and knowledge to improve outcomes for children.

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

Requirements

Requirement 1

By 07 June 2024, the provider must ensure children's wellbeing and development is promoted through the effective use of personal planning approaches.

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

- (a) personal plans set out children's current wellbeing and development needs and how these will be met,
- (b) all staff are aware of the information within the personal plans, including support strategies, and use these to effectively meet each child's needs,
- (c) personal plans are regularly reviewed and updated in partnership with parents.

This is to comply with Regulation 5(1) and (2) 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 '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).

This requirement was made on 19 April 2024.

Action taken on previous requirement

Personal planning approaches were becoming more consistent, helping staff to have an improved understanding of how to support children. Personal plans held useful information that supported staff knowledge of children's needs, wishes and preferences. For many children support strategies were recorded and implemented in practice. Staff knew most of the strategies to be used with individual children and could discuss the impact these were having. This was supporting some children to make progress. Some staff needed further support to develop their skills in relation to supporting children's needs. We report on this further within requirement five.

For some children further work was needed to ensure all strategies were recorded and implemented. For example, staff spoke about using object signifiers to aid communication, but this was not recorded within the child's personal plan. As a result, there remained some missed opportunities to reflect on and evaluate the impact of the support. Progress had been made but to ensure consistently positive outcomes for children, the provider should ensure ongoing quality assurance and staff development is implemented to enable all children to reach their full potential.

Reviews of personal plans and information sharing with parents was more consistent. As a result, staff were more informed about children's needs, routines and preferences. One parent said, "In the past few months we have seen a huge increase in communication with the nursery and the use of the online app." We sampled several plans and found these had been reviewed and updated with parents. However, some reviews and information had not been dated, which meant it was more difficult to track how relevant the information remained. One parent said they were unsure if they had reviewed their child's plan in recent months. We discussed some improvements that could be implemented to improve overall record keeping to support consistency.

Overall, the use of personal plans was more effective, and staff had an improved understanding of the needs of children. While further embedding of consistency was needed, children's care was benefitting from the use of personal planning approaches.

Met - within timescales

Requirement 2

By 07 June 2024, the provider must ensure the management of medication is safe and effective in order to maintain children's health and wellbeing.

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

- a) any medication required by a child is available in the service when the child attends and is correctly stored
- b) sufficient and accurate information about children's medical needs is gathered and used to plan for safe and effective care

c) procedures related to children's medication are in line with good practice guidance; 'Management of medication in day care and childminding services (Care Inspectorate, 2014)'.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users) 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: 'Any treatment or intervention that I experience is safe and effective (HSCS 1.24).

This requirement was made on 19 April 2024.

Action taken on previous requirement

Improvements had been made to the management of medication. All medication needed by children was present and stored safely. This meant staff could provide medication swiftly when needed.

Information about children's medication and health care needs was available and clear. The service had recorded the approaches to be used and included any signs and symptoms. This enabled staff to understand why and when a child may need support.

Staff knowledge and understanding of children's health care needs had improved. For example, staff knew which children had allergies and what items they should avoid. Some staff should revisit the detailed symptoms outlined in some children's medical information to ensure they are clear on how the medical need would present. Further work was needed to ensure staff regularly revisit the information to consolidate their knowledge. This is to ensure there are no delays in children receiving the right care. We discussed with the manager and provider some systems to aid this, for example, adding medication as a standing agenda item on the team meeting.

Overall, there had been positive improvements in the management of medication. As a result, children's health and wellbeing was being supported.

Met - within timescales

Requirement 3

By 03 June 2024, the provider must take action to address maintenance to ensure children's health, safety and wellbeing.

To do this the provider must, at a minimum :

a) develop and implement systems that identify and action the maintenance and refurbishment needs of the service in an appropriately timely manner,

b) ensure all those working in the service take steps to ensure the environment is safe and well-maintained.

This is to comply with Regulation 10 (2) (b), (c), (d) 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: '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).

This requirement was made on 19 April 2024.

Action taken on previous requirement

The provider had taken some initial action to address issues affecting the quality and safety of the environment. For example, action had been taken to add guards to radiators, install more handwashing facilities and remove items placed on top of the bin stores. However, other aspects of concern had not been addressed. For example, paintwork and flooring remained tired and ongoing maintenance such as the removal of weeds from the garden had not been addressed. Further work was needed to ensure the environment was well maintained.

Children did not experience a welcoming, well maintained and stimulating environment because there was not an effective system in place to manage and action the maintenance needs of the service. The maintenance system implemented following the last inspection had not been embedded. For example, items previously added to the service maintenance list had not been actioned and there was no system in place to address this. Also, issues found by inspectors such as a handle missing from a toilet door, dirty outdoor furnishings, and a fan covered in grime were not recorded. Staff told us that they did not regularly add items to the maintenance list. Therefore, there were missed opportunities for them to help improve the quality of the environment. We were concerned that the provider was not responding to maintenance issues in a timely and systematic way.

We remained concerned with the approach to maintenance within the service. The provider must address this requirement so that outcomes for children improve. We will continue to liaise with the provider and take further scrutiny action as needed.

This requirement had not been met and we have agreed an extension until 15 November 2024.

Not met

Requirement 4

By 19 April 2024, to ensure children are safe and protected, the provider must implement effective risk management arrangements relating to the professional registration of staff.

To do this the provider must, at a minimum:

- a) develop and implement robust and effective individualised risk assessments for staff who have not gained or retained a professional registration,
- b) develop and implement effective and individualised support and monitoring arrangements for staff who have not gained or retained appropriate professional registration.

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 requirement was made on 16 April 2024.

Action taken on previous requirement

This requirement was made during the last inspection through a letter of serious concern. During the last inspection, the provider had taken sufficient action to address the immediate risks. This included implementing appropriate risk assessments for the management of staffing and providing support to staff regarding their current duties. We report further on staff conditions of registration within requirement five.

Met - within timescales**Requirement 5**

By 29 July 2024, to promote the wellbeing of children, the provider must ensure that staff receive targeted learning and development opportunities that enable them to develop the skills, knowledge and competencies needed.

To do this the provider must at a minimum:

- a) identify what learning and development is required for individual staff and plan for learning to be undertaken,
- b) ensure any staff with current conditions placed on any professional registrations are supported and monitored in order to enable them to meet these conditions,
- c) implement quality assurance systems to evaluate the effectiveness of learning and development opportunities and ongoing competency of staff.

This is to comply with section 8(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

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 3.14).

This requirement was made on 19 April 2024.

Action taken on previous requirement

We remained concerned about the opportunities staff had to develop the skills, knowledge and competencies needed to effectively promote positive outcomes for children. Gaps remained in the quality of the environment and staff understanding of how to provide high-quality care, play and learning for children.

Limited work had taken place to identify the individual learning and development needs of staff. As a result, staff had not been enabled to develop their skills and therefore, outcomes for children remained inconsistent. The new manager had started to implement some systems to support staff development, but these were at an early stage and not yet leading to improved outcomes. The provider must ensure that staff receive targeted learning and development opportunities to enable them to effectively support children across all areas of the service.

Training and learning opportunities had been limited to online courses. Some of these courses supported staff knowledge, for example, training in child protection enabled staff to understand their safeguarding duties. However, most of the learning from other courses was not yet embedded in practice. The provider had not enabled staff to undertake other forms of professional development. For example, at earlier inspections we had discussed how the provider and staff could visit other services to gain ideas and see

good practice, but no visits had been arranged. The provider must ensure staff have a range of opportunities to develop the skills, knowledge and competencies needed to provide high-quality care, play and learning. The provider and manager must further develop ways to support staff to understand current good practice and how this is delivered.

The overview of staff registration with professional bodies was inconsistent. The provider did an informal check of registrations but there was not a robust system to track staff conditions and how these were being met. Previous plans for staff development had not been monitored. This meant there were missed opportunities to support staff in meeting conditions of registration. To ensure staff are supported to develop their practice, the provider must have a robust overview of the staff team's professional registrations and their continuous professional development needs.

While we recognise a change in manager may have impacted on the progress of this requirement, the provider must take action to support staff to develop the skills, knowledge and competencies needed.

This requirement had not been met and we have agreed an extension until 10 January 2025.

Not met

Requirement 6

By 03 February 2023, the provider must implement robust quality assurance processes covering key areas of practice.

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

- a) implement safety and wellbeing checks for environment,
- b) carry out monitoring of staff practice and deployment,
- c) carry out monitoring of children's care, play and learning experiences,
- d) ensure effective and realistic planning to address any issues found.

This is to comply with Regulations 4(1)(a) (Welfare of users) 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, 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

The requirement had been restated with a new timescale of 19 July 2024.

This requirement was made on 19 December 2022.

Action taken on previous requirement

Some progress had been made in relation to supporting children's wellbeing and care. Management of medication and personal planning approaches had improved. As a result, children's wellbeing was better

supported. However, we remained concerned about ongoing gaps in the quality of the service. Significant gaps remained in the areas covered by the quality assurance systems.

The quality assurance systems to help staff ensure children's health, safety and wellbeing were not effective. The new manager did visual checks of the environment, but these were not yet having an impact. Quality assurance tools such as cleaning checklists and room plans were limited in detail and did not effectively guide staff. We discussed with the manager and provider ways that they could improve quality assurance systems to aid improvements. The provider must address these concerns and enable the manager and staff team to sustain a safe and well-maintained environment.

Limited work had started to monitor staff practice. While staff one to ones had started not all staff had been supported to reflect on their practice and set out plans for improvement. The systems in place to monitor staff practice were informal and not leading to positive, sustained changes.

Children's play and learning experiences remained inconsistent. For example, the range of experiences remained poor. Children did not always have access to core resources that would stimulate and challenge them. We recognised that the service was making more use of the local community to support learning, however, opportunities for learning within the service still needed to improve. Children were not effectively and sensitively supported to achieve and learn.

Improvement planning focused on the requirements and areas for improvement from the last inspection. However, the pace of change was slow, and improvement planning was not yet leading to sustained improvements.

The provider must ensure that quality assurance practices are developed and embedded to enable outcomes for children to improve at an increased pace.

This requirement had not been met and we have agreed an extension until 20 December 2024.

Not met

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 demonstrate how nappy changing facilities will protect children from the risk of infection and provide privacy and dignity, the provider should submit an action plan to the Care Inspectorate. This should include how suitable facilities for children under two years and for children over two years will be developed, using current good practice guidance. The provider should detail a reasonable timescale within which the improvements will be made.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.18).

This area for improvement was made on 19 April 2024.

Action taken since then

The provider submitted a plan to the Care Inspectorate that outlined how improvements would be made.

During the inspection, we saw work had started to improve the nappy changing facilities for children under two years old. An additional handwashing sink had been added to the current nappy changing facilities. As a result, staff and children had access to better facilities.

The timescale for completion had shifted slightly. However, the provider was committed to finishing the work in a timely manner.

This area for improvement had been met.

Previous area for improvement 2

To improve outcomes for children in line with current good practice and to support the service to address required improvements, the provider should develop a clear and robust improvement plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 19 April 2024.

Action taken since then

Improvement planning was not yet having a significant impact on the quality of the service. Some progress had been made in relation to children's medication and personal plans. As a result, aspects of children's health and wellbeing had improved. However, other aspects of improvement such as developing and maintaining quality play and learning opportunities had not significantly progressed.

The new manager was beginning to understand the improvements needed in the service and had plans to work with staff to develop improvement planning further.

The provider should ensure the service uses current good practice guidance to improve outcomes for children.

This area for improvement had not been met and remains in place.

Previous area for improvement 3

To support the quality of children's play and learning experiences, improved approaches to planning for play and learning should be developed and implemented.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 19 December 2022.

Action taken since then

Further work was needed to ensure planning approaches led to improved play and learning experiences.

Some children were having fun, enjoying active play in the garden and stories indoors with staff. Improved use of the local community had supported learning. For example, children enjoyed weekly trips to the library where they learned rhymes. When considering approaches to planning play and learning the new manager had started to support staff to understand responsive, in the moment experiences to help them extend children's interests. One parent told us, "In terms of personalised play, I want to mention staff very quickly picked up our child's interest in drawing/mark making and really encouraged art activities." However, overall the experiences provided did not always promote sufficient levels of challenge and interest for children as the skills and knowledge of the team was inconsistent and not yet supporting high quality play and learning.

The new manager had introduced floorbooks as a tool to plan and record children's play and learning. Information in the floorbook was mostly descriptive. While the experiences linked to some children's interests, further extension of these interests were not reflected in the ongoing provision. For example, recent enjoyment of dancing had not led to any further extension within the resources and materials available to children each day. Within the floorbooks, there were limited next steps and observations of significant learning. As a result, the use of floorbooks was not yet having an impact on the quality of learning experiences.

There were limited systems in place to track and monitor children's progress and observations of children's development varied in quality. Some parents felt the observations were detailed and showed children's progression. One parent told us, "A staff member has added several "observations" about our child's development in the app, including information about how they will continue to support a particular learning, and we have really seen these things come to life at home". For other children observations were more infrequent and did not identified significant learning and next steps. Most staff made basic observations in children's online learning journals and within personal plans, but these were often narrative and not effectively evaluated. This meant there were missed opportunities to track progress and plan learning opportunities that could support and challenge children.

This area for improvement had not been met and remains in place.

Previous area for improvement 4

To support children's play and learning experiences, the provider should improve the environments and the resources available to children. This would include but not be limited to; ensuring areas are appropriately resourced, developing cosy and comfortable spaces for children to relax and play, adding open-ended materials and ensuring resources reflect children's interests.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: '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) and 'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax' (HSCS, 5.6).

This area for improvement was made on 19 December 2022.

Action taken since then

Overall, the general environment and resources did not offer children consistently positive play and learning experiences.

Children's choices and experiences were limited due to a lack of core provision. For example, there was a lack of playdough, paint and art materials. Items provided were often tired and uninspiring. For example, within the designated construction space children had been provided with some plastic track but no cars or other items to add to this. A table-top dolls house had limited furniture and small world people with it. This meant children were not inspired to play with it. A lack of open-ended natural materials meant there were missed opportunities to promote children's natural curiosity and inquiry skills. Over time a lack of stimulating resources and experiences could have a significant impact on children's learning. The provider should ensure the quality of resources, and the environment improves so that children are supported to reach their full potential at the service.

Some progress had been made in relation to the development of cosier spaces for children to play and relax. Within the baby room a soft matted pod had been added. Children enjoyed resting here and sometimes took books and toys into the space to enjoy some quieter time. Within the older children's space there were a few soft furnishings in the story corner and some children enjoyed looking at books with staff and sharing stories. However, the quality of areas and furnishings still needed to improve. For example, within the older children's story corner the provider had used a stack of mats with a blanket to create a sofa. This was not comfortable for children and the blanket often came off meaning it did not look inviting. Also, the books were not displayed in a way that invited children to read them. To ensure children are motivated to play and learn, the provider should support the staff and manager to review and improve the quality of spaces to ensure children have comfortable areas to relax and play.

This area for improvement had not been met and remains in place.

Previous area for improvement 5

To support children to experience positive care and support, improvements should be made to the support and guidance provided to staff. This would include but not be limited to developing the approach to staff inductions to ensure they include opportunities to provide guidance, enhance staff knowledge and monitor practice.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 19 December 2022.

Action taken since then

Further improvements were needed to enhance the quality of inductions and the overall support and monitoring of staff practice.

An induction checklist had been introduced and staff said they felt supported to ask questions as they settled into the service. However, there were missed opportunities within the induction process to fully support and guide staff. For example, there was not an overview of staff training so there was not a system to enable the manager and provider to consider what initial training new staff needed as a matter of priority. Staff files were incomplete and disorganised. This meant information such as references were not being used effectively to inform the induction process.

There was not an effective system in place for monitoring staff practice or progress over time. The new manager had informal check-ins with staff helping them to develop a supportive relationship. The new manager had begun to meet with staff to review their learning and development needs. However, this action was at an early stage and not yet embedded. For example, the manager had only conducted one to one meetings with two members of the staff team. As a result, the process was not yet robust and effective.

To ensure children experience consistently positive care and support from a skilled, competent and knowledgeable team, the provider should ensure staff inductions, and ongoing support and guidance processes are improved and embedded.

This area for improvement had not been met and remains in place.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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