

Madeira Nursery Day Care of Children

14 Newark Street
Greenock
PA16 7UH

Telephone: 01475 722 892

Type of inspection:
Unannounced

Completed on:
30 August 2024

Service provided by:
Anna Harley

Service provider number:
SP2003000822

Service no:
CS2003004064

About the service

Madeira Nursery is based in the west end of Greenock within shared premises which are part residential. They have the use of three playrooms, a dining room and an outdoor area to the rear of the service. The service is in partnership with the local authority, Inverclyde Council.

It is registered to provide a care service to a maximum of 35 children from birth to not yet attending primary school:

- 0 to under 2 years - 9 children
- 2 to under 3 years - 10 children
- 3 years to not yet attending primary school - 16 children.

The service operated Monday to Friday throughout the year between 7.30am and 5.30pm. At the time of our inspection, 71 children were registered with the service.

About the inspection

This was an unannounced inspection which took place on 28 August 2024 between 10:15 and 17:00 and 29 August 2024 between 09:00 and 16:30. Feedback was provided on 30 August 2024 between 15:00 and 17:00. 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 throughout the inspection year. To inform our evaluation we:

- spoke with children using the service
- received 36 completed questionnaires
- spoke with staff and the leadership team
- observed practice and daily life
- reviewed documents.

Key messages

- Children's needs were met through nurturing and responsive interactions, which helped children feel loved, safe and secure.
- Children had fun, and their play, learning and development were supported by activities appropriate to their age and developmental stage.
- A strong emphasis was placed on outdoor play, supporting children to be active and healthy.
- The leadership team developed more effective self-evaluation and quality assurance processes to review and improve the service.
- Staff should continue to develop cosy spaces where children can rest and relax.
- Staff should continue with their plan to develop playroom layouts and resources for children under two years indoors and outdoors.
- The provider should continue with their plan to improve hand hygiene in the service to keep children safe and minimise any possible risk of infection.

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 experienced care and support from a staff team that respected each child as an individual. Interactions between staff and children were warm and caring, creating a loving, nurturing environment.

Families who responded to our MS Forms survey agreed they were happy with their child's care and support in this service. Some of their comments included:

"A warm homely environment for young children where they feel safe and happy".

"Child leaves nursery happy and often talks about other children and staff and what they did during the day".

"My child's relationship with staff and other children. I trust my daughter feels safe, cared for and respected".

Children were confident in the staff's care, knowing their individual needs would be met. Staff offered appropriate affection when children were settling and in need of support. Staff responded to children respectfully and playfully, supporting children in feeling loved, cared for, and secure.

Regularly reviewing children's personal plans meant staff provided personalised care to meet their individual health, safety, and wellbeing needs. Where children required additional support, this was identified. Staff worked proactively with children, families, and other professionals to identify next steps and strategies for children based on their individual needs.

Families who responded to our MS Forms survey agreed they were fully involved in their child's care, including developing and reviewing their personal plan, with one commenting:

"Personal plan has been suggested to be reviewed recently, and my daughter is moving to the older room and settling in to accommodate her needs".

The leadership team should continue to audit these working documents to support the health, welfare, and safety of all children.

Changes made to children's mealtimes since the last inspection improved their experience. Overall, they were unhurried and relaxed, a sociable experience for children. We discussed the importance of staff positioning themselves when sitting with children to ensure they can respond quickly should a choking episode occur and remain in the playrooms at all times. Staff used this approach promptly to ensure children's safety.

Children were encouraged to be independent when eating and offered support when needed. Children aged three to five years had opportunities to use the utensils available to self-serve. This approach should be

encouraged across all age groups where appropriate to support children's independence and life skills. We discussed how staff could eat with children to provide a positive role model and encourage positive eating habits.

Regular exercise and fresh air helped support children's health and wellbeing. Children had fun outdoors, splashing in puddles, running around with friends, playing football, and using their imaginations.

Quality indicator 1.3: Play and learning

Children were having fun as they played, sometimes with friends, sometimes on their own, and being supported by staff to express their thoughts and feelings. This helped children to be confident and feel safe communicating their preferences while developing relationships with other children.

Children made choices from the play and learning experiences on offer to them, choosing to play indoors or outdoors for the session. Children who required more adult support to engage in play were supported by staff offering praise and encouragement.

Some staff demonstrated an understanding and knowledge of child development, theory, and practice, such as schematic play to extend children's thinking. The ongoing development of champion roles and working groups will ensure that all staff are equipped to provide this level of support.

Children were encouraged to lead their play and learning indoors and outdoors. They had access to resources and play experiences that helped develop their language, literacy, and numeracy skills. This included children across all playrooms listening to stories and singing songs.

Through active play, younger children reenacted the familiar story 'Going on a Bear Hunt,' and older children developed their early writing skills as they learned about the post office.

Outdoors, older children made an obstacle course using large blocks. This experience resulted from children taking part in a planned learning experience previously, where they learned about the Olympics. This supported children in making connections in their learning.

Children's play and learning were shared regularly with families through a private social media platform and an online digital app. These platforms and the newly formed early learning trackers linked to the Curriculum for Excellence and benchmarks will allow for comprehensive tracking of children's progress in skills, planning for targeted intervention, and identifying children's next steps in learning. Ensure families are well-informed about their child's learning journey and strengthen the play resources, experiences and environment.

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

Children benefitted from a homely and inviting environment. The entrance areas were decorated with attractive information, which helped promote family engagement.

Playrooms across the setting supported children in feeling safe and welcome and having a sense of belonging. Children were cared for in designated playrooms that provided ample space to play and were organised to support their stage of development.

The setting provided children with various sensory and cause-and-effect play opportunities indoors and outdoors, such as splashing in puddles, shaving foam and playdough, and developing movement skills as children rolled and used objects to roll down the hill. These activities helped stimulate children's senses and supported their social, communication, and physical skills, instilling confidence in their developmental progress.

All playrooms had accessible resources for children to choose from, including various suitable play equipment, including some natural materials, to support children's imagination and exploratory play. As a result, children had fun as they explored, which enhanced their thinking and creativity skills.

Staff reviewed play and learning spaces within the playrooms for children aged two to five years. They were committed to continuing their plans to develop the quantity and quality of resources for children under two years old, indoors and outdoors, to enhance young children's experiences and outcomes.

The layout of the playrooms was set out to enable children to engage in various play activities on their own or in small groups. Comfortable spaces included carpeted areas and bean bags. Staff across all playrooms should continue to develop cosy spaces where children can rest and relax.

Children benefitted from having a large outdoor space that included grassed areas of different levels and mature trees. Although children could not safely free-flow independently to the outdoor play area, daily outdoor play was offered to all children, with some children choosing to spend most of their sessions outdoors. Staff should continue their plan to develop the outdoor play area involving children and their families.

Children were kept safe through a comprehensive range of safety measures. For instance, attendance records, secure entry to premises, and risk assessments were maintained. Staff operated the entrance to the setting, ensuring no children could leave the building unauthorised and preventing any unauthorised entry to keep children safe. Staff communicated with each other and maintained records, ensuring children's whereabouts were accounted for throughout their sessions, providing a reassuring sense of security for families.

Children and staff washed their hands before and after eating and playing outdoors. However, the playrooms had no handwashing sinks for staff or children. This meant staff and children had to leave the room to access handwashing facilities, where they opened and closed doors with potentially contaminated hands during the process. The provider has provided evidence that handwashing facilities across the service will be installed. These improvements to facilities will ensure children are safe and any possible risk of infection is minimised.

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

The service's vision, values, and aims, including providing a safe, caring, stimulating learning environment, were reflected in practice in the setting.

The leadership team's welcoming and supportive nature fostered a positive work environment and promoted team morale. This was evident in the staff's feelings of personal and professional support.

The leadership team's recognition and support of the practitioners' skills, giving them ownership of their playrooms, further enhanced this positive atmosphere.

The manager was visible during the sessions, offering staff support and taking the lead when needed. Staff told us they felt valued and supported. This contributed positively to children's overall experiences.

Shared leadership roles across the team were encouraged, and some staff had undertaken roles and research to develop specific aspects of the service, which enhanced their confidence. Opportunities should be further developed for staff to engage in reflective practice to build their skill set and knowledge.

The leadership and staff commitment to developing the setting and promoting positive outcomes for children was evident and a driving force behind the actions taken in response to the areas for improvement identified during the last inspection. The actions taken and the dedication to continuous improvement should serve as a source of inspiration and motivation to maintain and further enhance positive outcomes for children.

Children and families benefited from improved quality assurance processes, such as the leadership team undertaking monitoring and auditing of specific areas in the nursery and updating risk assessments and policies. While recognising this progress, the leadership team should ensure these quality assurance systems are consistently implemented across all aspects of the service. This should include but is not limited to monitoring staff practice and skills to maintain positive and quality experiences and outcomes for children.

An improvement plan has been developed with areas identified to address gaps in service quality. The leadership team should continue to ensure views are routinely sought from children, staff, and families so that they can give their opinions to influence change.

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

The leadership team recognised and valued the importance of ensuring the service was appropriately staffed throughout the day. Staff breaks were planned to minimise the impact on children while allowing staff time to rest and be refreshed. Effective staff deployment meant staff supported nurturing experiences and could meet all children's individual needs well.

Staff communicated and worked well together to ensure children were safe and engaged in quality experiences throughout the nursery sessions. This created a respectful atmosphere, ensuring children's experiences were positive and appropriately supported throughout the day.

Staff's deep understanding of children and their ability to establish secure relationships with them was evident. They supported children in ways that were appropriate to their individual needs, creating a safe, secure, and happy environment.

Working with families and their involvement was important to staff and the leadership team. Families' views were gathered through self-evaluation forms and online digital platforms. As part of family engagement, the stay-and-play sessions led by the staff team helped strengthen relationships with families. The planned events allowed staff, children and families to build strong bonds through play and learning in a fun way that enhanced family experiences.

Families who responded to our MS Forms survey agreed they have a strong connection with the staff caring for their children. Some comments included:

"I find all the staff lovely and very caring".

"All staff welcome you warmly and are happy to speak to you. They know each child very well".

"Staff are welcoming and always verbally update on child's day at end of session".

Regular meetings ensured staff were kept informed, knowing what was expected of them to enable them to provide quality experiences.

Arrangements for planned or unplanned absences were managed effectively to support minimum disruption to children's routines. The service had a positive ethos of attendance, which further enabled children to build secure attachments with staff.

Staff were happy at their work and dedicated to providing quality experiences for children and families.

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, safety and wellbeing, the provider should review sleeping arrangements in line with safe sleeping guidance and agree this with parents. This should include, but not be limited to:

Staff training on safe sleeping guidance which should be applied to their practice.

Safe sleeping arrangements should reflect parents' wishes.

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

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices respected' (HSCS 1.23).

This area for improvement was made on 24 April 2023.

Action taken since then

Satisfactory improvements to the sleeping arrangements for children under two years were made in line with safe sleeping guidance. This included staff training to support best practices and active involvement of families in respecting their wishes and gaining informed consent. Sleep routines individually supported children's needs, and staff supervised them to keep them safe. Children's sleep routine preferences were recorded in their 'All About Me booklet and personal care plan.

This area for improvement has been met.

Previous area for improvement 2

To keep children safe and healthy, management should update the medication policy, guidance, recording and storage of medication procedures in line with current best practice guidance 'Management of Medication in Daycare and Childminding Services'.

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 area for improvement was made on 24 April 2023.

Action taken since then

Satisfactory improvements were made to the safe administration processes used for medication to maintain children's health and safety. Overall, medication was administered and stored safely. The leadership team regularly audited medication processes with staff and families to ensure medication was reviewed and updated if required. Staff had knowledge and skills to understand and manage children's health needs and were trained in administering emergency medication. The provider provided assurance that emergency medication would be more accessible for staff to administer when needed to keep children safe.

This area for improvement has been met.

Previous area for improvement 3

To promote their individual learning and development the service should provide children with a choice of a rich variety of experiences. Consideration should be given to; supporting children to lead their own learning, opportunities which stimulate creativity and curiosity and cosy spaces for children to relax in.

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

'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

This area for improvement was made on 24 April 2023.

Action taken since then

Satisfactory improvements were made to play and learning experiences for children to promote their individual learning and development. Children were provided with various experiences, including loose-parts play, that supported them in leading their play indoors and outdoors and stimulated their creativity and curiosity. The service should continue with its plans to include cosy spaces for children to rest and relax across all playrooms.

This area for improvement has been met.

Previous area for improvement 4

To keep children safe the provider should ensure that robust risk assessments, including any mitigations, are in place and adhered to. This should include, but not limited to, all spaces accessed by the children, including the outdoor area.

This is to ensure that 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).

This area for improvement was made on 24 April 2023.

Action taken since then

Robust mitigations of risk were in place, and children were also involved in assessing risk during discussions and using pictorial forms. This approach allows children to evaluate their safety, engage in various experiences, and take appropriate risks under adult supervision.

This area for improvement has been met.

Previous area for improvement 5

To keep children safe and healthy the provider should make improvements to hand washing facilities within the service. This should include, but is not limited to:
separate handwashing facilities for staff and handwashing facilities at food preparation areas.

This is to ensure that 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).

This area for improvement was made on 24 April 2023.

Action taken since then

The provider provided evidence of planned alterations across the service, including the kitchen, for installing handwashing facilities. This will promote good hand hygiene for children and staff, improve their health and safety, and help prevent infectious disease outbreaks and cross-contamination.

This area for improvement has been met.

Previous area for improvement 6

To improve experiences and outcomes for children, the manager, with support from the provider, should develop and implement robust quality assurance systems including self-evaluation with a focus on monitoring children's personal plans, children's play and learning experiences, evaluating changes implemented and impacts on outcomes for children.

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

'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 24 April 2023.

Action taken since then

Satisfactory improvements were made to the service quality assurance systems, including self-evaluation, service improvement planning, risk assessments, and policies to support needed improvements. The leadership team audited specific nursery areas, including children's care plans, sleep routines, medication, play and learning. To support the manager in sustaining and making continual improvements, the provider should ensure the manager has sufficient time to undertake their responsibilities effectively.

This area for improvement has 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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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