

St. Sylvester's Nursery Day Care of Children

Abbey Street
Elgin
IV30 1DA

Telephone: 01343 569 228

Type of inspection:
Unannounced

Completed on:
4 September 2024

Service provided by:
St. Sylvester's Nursery

Service provider number:
SP2003001905

Service no:
CS2003008890

About the service

St. Sylvester's Nursery is a day care of children service situated in the town centre of Elgin. The service is registered to provide a care service to a maximum of 44 children aged from two years to those not yet attending primary school, of whom no more than 12 may be aged two to under three years. A maximum of 40 children may be cared for when the children attending are all aged three years to not yet attending primary school.

The service is situated in the town centre area near shops, a library, a community garden, a park, wooded areas and other amenities. The children are cared for in a one storey building and cared for in a large open plan playroom. A small outdoor play area is accessed directly from the playroom.

About the inspection

This was an unannounced inspection which took place on 3 September 2024, between 08:30 and 15.45pm and 4 September 2024, between 08.30 and 13:00. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with children using the service
- contacted 11 parents/carers
- spoke with staff and management
- observed practice and daily experiences
- reviewed documents.

Key messages

Children's overall wellbeing was being supported by the warm and caring approaches of the staff.

Staff worked well with families to get to know the individual needs of the children.

Children were having fun and were meaningfully involved in initiating their own play and learning, they were able to choose whether to play indoors or outdoors.

Overall, the indoor and outdoor environments had been sensitively structured and took account of the children's stages of development and learning.

To support the safety and wellbeing of children requiring medication the manager and staff should ensure that all medication is supplied in its original container.

The manager led staff well so that staff had confidence in their role to support families and children to achieve their potential.

Children experienced a warm and respectful atmosphere, staff interactions were caring and kind that was conducive to their wellbeing.

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/people and clearly outweighed areas for improvement.

1.1 Nurturing care and support

Children's overall wellbeing was being supported by the warm and caring approaches of the staff. When children were upset staff provided words of comfort and offered cuddles that promoted positive relationships. Children were helped to manage their feelings through their association with the story of the colour monster and tangible coloured toys. The presence of the concept within the service enabled staff to talk with children and understand how they were feeling and why. A child was able to show us the monsters and picked up a colour that told us how they were feeling which was happy.

Where children needed support with personal care the warm interactions of the staff supported children's confidence. Staff understood the importance of sleep for children's overall development and routines supported good habits around sleep. A child was needing to sleep after lunch they settled on a nursery rest bed in a quiet area and they were comforted by the presence of staff. The quiet/cosy area was used by the children for quieter activities. Children sat with staff on an adult size sofa and snuggled in whilst reading a book together, it helped them to rest and recuperate. The area was well equipped with blankets and a variety of cushions. A wooden framed teepee tent was less appealing and had appeared to have lost its purpose as a cosy/calming space. The manager explained the cover had torn and other options to reinstate its purpose were being explored.

Staff worked well with families to get to know the individual needs of the children. Parents told us that they found staff very approachable and caring towards their child. Children with additional needs were well supported as professionals had helped to identify appropriate strategies. Such information was clear to all staff who worked with the children and arrangements were in place so that it was used consistently. Families had been involved in the creation and review of the child's personal plan, such as health, interests and likes/dislikes to help identify individual needs and to support overall wellbeing and promote consistency of care. We advised the manager that personal plans should be formally reviewed a minimum of six monthly to help promote continuity of care. We suggested that face to face conversations between key-worker and parents were beneficial during the review process.

Chronologies also helped to identify children's needs and directed actions to support them well. Overall they were being used appropriately, there were some gaps in following up information to ensure needs were met and we discussed this with the manager.

Parents strongly agreed and agreed they were fully involved in their child's care, including developing and reviewing their personal plan. Stay and play sessions provided an opportunity to see their child's care and learning. Staff were always happy to discuss any queries even at busy times.

Children were involved in the delivery of their snacks and meals, they collected their own utensils, and side dishes were also placed on the table. Children they poured their own drinks as well as clearing and rinsing their own plates/dishes. We discussed the benefits of children being involved in the preparation of snack such as setting up and cutting up fruit etc. Children enjoyed sitting together in small groups at round tables and chatting with each other, it supported a pleasant social experience that was unhurried.

The arrangement was relatively new although staff had seen children embrace and enjoy the experience. Overall staff sat with the children, they were focused on, and able to respond to the needs of the children. Although as children started to move away from the table there was a tendency for staff to become task orientated and less observant. We suggested that continued monitoring and evaluation of the arrangement would help to ensure that it remained an opportunity to promote close attachment between staff and children.

Food choices reflected current guidance and were appropriate for children's dietary needs and/or food preferences. Children had individual water bottles easily accessible to them within the play room. Whilst we saw a couple of children help themselves they had to seek help to pull up the water bottle cap. We shared this with the manager and also considered that staff encouraging children to drink would enable them to remain hydrated throughout the day.

There was a discrepancy in the supply of as required medication as it was not in its original container. We discussed this with the manager and also suggested that any medication brought to the service on a daily basis was signed in and out. We also advised that as required/long term medication should be reviewed either every 3 months or once per term. Ref: Management of medication in daycare of children and childminding services. (see area for improvement 1).

1.3 Play and Learning

Children were having fun and were meaningfully involved in initiating their own play and learning. Children were able to choose whether to play indoors or outdoors and did so for various periods throughout the day. The generally calm atmosphere also helped children to be motivated in their play.

Resources and materials were readily accessible and visible within the play area. Children enjoyed the group experience of making play dough together taking it in turns to pour liquid and mix the ingredients together. Staff had conversation throughout about what was needed and what was happening to the mixture. Children were experimenting in the construction area with different sized wooden blocks/planks and rubber building bricks. They built a small obstacle course to balance and a see-saw then had fun seeing how far they could hurl a small object. A child was building a tower with rubber bricks and was determined to get it higher than themselves. Children were engrossed in junk modelling and very proud of their work, that included a handbag, robot and aeroplane. A child who was still proud of their efforts the next day told us how they had not taken it home the previous day as they had to be sure the glue was dry so that it did not break.

Children enjoyed creative play in the large outdoor mud kitchen, it had real utensils and equipment such as an old water boiler and microwave. A child told us how they were making soup and that they needed a pan and spoon, they scrapped up some mud and added some gravel, it was chicken and potato. Following some heavy overnight rain there was a large puddle in the outdoor play area, children enjoyed splashing and jumping, and filling containers. The novel experience provided lots of enjoyment and laughter for children and staff who were engaging with them.

Continuing to offer versatility of resources to the children would help to ensure that they were led to find ways to see how things worked and to explore their emerging interests and provide challenge. We discussed this with the manager for all children but particularly in relation to the younger children and schematic play that supported brain development. Extension of literacy and numeracy resources within learning areas would encourage rich play across children's experiences. Such as food items in the role play kitchen, scales, phones and recipe books, tape measures, spirit levels in the construction area. There could be more evidence of numbers and letters throughout the play area.

Staff listened and talked with children during activities, modelling language and engaging them in stories. Conversations with the children provided challenge and opportunities to build on their interests. To help ensure that a consistent approach was maintained, we advised the manager to embed the programme of observing and monitoring staff practice that also helped to identify any training needs

There was a balance of spontaneous and planned quality experiences that followed children's interests. This was particularly evident in the floor books, (a document which records children's ideas and thoughts when they have been part of the planning process) that demonstrated shared learning experiences. Responsive and intentional planning whilst at an early stage of development but was being progressed. The service had been receptive of the support from the local authority early years' teacher, that helped to support staff to develop their skills in recognising 'teachable moments'. Children's learning folders contained observations of their learning and information about their progress, achievement were. To support a consistent and meaningful approach being sustained by all staff, learning and next steps was included on the quality assurance calendar for staff meetings. A child was keen to show us their folder and when looking at photo's told us that they had built a big house with bricks it took a long time and that they had been looking for treasure in the sand and found lots of 'gold', shells and coins.

Parents told us that their child's development was always supported through interesting and fun play experiences and always had the opportunity to play outdoors. A parent considered that the staff always followed children's interests in their planning.

Play and learning was enhanced through connections with the wider community. Pre-school children used the library and gym at St. Sylvester's school each week that helped to support transition to school. Children went on walks in the local community, visited the church garden, parks, woodlands and a supermarket. Parents told us how happy they had been that not long after their child started they had been on a bus trip and that visits that enabled their child to explore and offered a variety of learning opportunities.

Areas for improvement

1. To support the safety and wellbeing of children requiring medication the manager and staff should ensure that all medication is supplied in it's original container and box, clearly labelled with the child's name and also contains the information leaflet.

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

'My care and support meets my needs and is right for me' (HSCS 1.19) and

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

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.

Children benefited from being cared for in a comfortable setting. Neutral décor and windows provided plenty of natural light and ventilation that helped to promote children's psychological wellbeing. It helped to give the message to children that they mattered. Children had ample space for their needs.

Communal areas within the setting were generally clean and well maintained. We discussed the cleaning of soft furnishings such as soft toys and cushions as they appeared somewhat shabby. We suggested that a cleaning schedule may be beneficial for such purposes to help avoid less obvious areas being missed. The manager agreed that the toilet cubicles would benefit from a fresh coat of paint as areas were stained following a water leak and loose toilet seats needed replacement/repair. A discussion took place regarding the current nappy changing facilities that were not promoting dignity and respect due to its current location. The manager was already in the process of exploring an alternative provision that would address the issue. Following a discussion, the manager was keen to implement changes that would support both the safety and wellbeing of children and staff. The changing mat would also be replaced as it was worn in places and did not support good infection control practice. Ref: Nappy changing for early learning and childcare settings (excluding childminders) Feb 2024.

Infection and prevention control supported the safety of the children through practices such as good hand hygiene. Children washed their hands at key points throughout the day such as after messy play, being outdoors and before eating. Overall staff supported children well although the push button taps were hard to operate for the youngest children and we asked the manager to ensure that staff provided prompt levels of supervision and support. Where children needed personal care, staff wore disposable gloves and aprons to help minimise the spread of infection. Staff had completed food hygiene training to support safe practice.

Staff worked well together to remove risks to the children within the setting both indoors and outdoors. Practice helped to ensure that children were accounted for at all times and that the environment was safe and secure. It helped to ensure that activities were not compromised and that children were supported to enjoy fun play experiences. Using good practice guidance consistently to review/refresh practice would also to help ensure the safety and wellbeing of children was maintained, Ref: SIMOA (Safe, Inspect, Monitor, Observe, Act) and Keeping children safe practice notes - hub.careinspectorate.com

Overall, the indoor and outdoor environments had been sensitively structured and took account of the children's stages of development and learning. The manager and staff should continue to evaluate and arrange spaces to reflect children's interests and curiosities, focused on open ended (no fixed purpose) and real resources to invoke imagination and challenge. Creative and sensory play activities were quite wide spread within the room. We suggested that having them located more closely together would be beneficial for the youngest children in making choices and enable staff to provide close support and quality interactions.

How good is our leadership?

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.

The vision for the setting had been reviewed with children, families and staff. It helped everyone to know what was important to the setting to meet the needs of children and families. The manager was creating conditions where all people felt well-informed to share responsibility for the change process.

Parents had been given the opportunity to share their views about the service and suggest any areas for improvement. They had also been invited to share their views about stay and play sessions. Where parents had made a small number of suggestions the manager and staff had taken action to address them. Parents were able to chat with staff at drop off and they were invited into the setting when picking up their child. We discussed the benefits of meaningful parental involvement with the manager. Ref: Me, my family and my childcare setting: A practice note for building stronger connections and meaningful relationships - careinspectorate.com. Children were involved in directing their play and learning through floor books. Children would benefit from continued opportunity to be more involved in the evaluation of their environment. For example lunch provision had been changed and their would be value in gathering children's views as part of the evaluation process.

Parents agreed and strongly agreed that both them and their child were involved in a meaningful way to help develop the service. Parents told us that parental engagement was encouraged at the setting. A parent was glad that pick up times were now in the nursery as it gave parents the opportunity to see the setting and speak to all staff (key worker), it was definitely a positive change.

The manager led staff well so that staff had confidence in their role to support families and children to achieve their potential. Staff had a clear understanding of and shared daily roles such as meet and greet at drop off/pick up, meals and snacks, personal care, that helped to ensure smooth delivery of the service. The manager had consulted staff around the timing of staff meetings, in recognition of the value of staff being able to share practice and reflect well together, and use such reflections to bring about positive change. It was also anticipated that a calendar of planned meetings for the academic year would also be beneficial. A meeting minute was completed and there was an action plan that helped to identify who had responsibility for change improvement. The minute was not always clear how actions had been resolved/progressed and ensuring they were followed up, would support the process of self-evaluation.

The service improvement plan helped to identify and inform improvement in the quality of service to children and families. The support of the local authority early years team had enabled a new format of self-evaluation that monitored improvement to be established. It was enabling clarity of purpose and direction to be developed. We advised the manager to ensure that the format measured the impact on outcomes for children and families. Quality assurance systems that included observation and examination of practice to identify inconsistencies were being established. Monitoring, maintenance and repair of the setting should also be included to ensure that children continued to experience positive care and learning. We discussed the benefits of such systems being clearly identified and implemented to support a robust approach that enhanced delivery of quality practice.

How good is our staff team?**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.

Leaders recognised the importance of ensuring that the service was appropriately staffed during the day to support the wellbeing of children. Arrangements were in place to promote continuity of care across the day and ensure positive transitions and communication with families. Parents strongly agreed and agreed that they had a strong connection with the staff caring for their child. They told us that the staff were very nurturing and caring towards their child. Staff helped to make the nursery a lovely place and were invested in their child's care.

Staff had different roles associated with their levels of experience, skills and knowledge. Daily responsibilities were shared between the staff to support children's experiences across the day. Staff breaks were planned to minimise the impact on the children whilst enabling staff to refresh.

The established staff team worked well together and there was a culture of support and respect. Overall staff communicated well with each other when a task took them away from their responsibilities. Although, on a brief occasion following lunch a number of staff were involved in supporting children with changing for outdoor play and remaining staff were involved in tasks. A lack of communication and awareness, meant that there was very limited engagement with the remaining children. We discussed this with the manager in relation to the dispersal of staff and the wide spread play area. There was scope to examine the arrangements, so that staff were able to consistently promote interactions and support to the children, that helped to ensure quality outcomes.

Children experienced a warm and respectful atmosphere. Staff interactions were caring and kind that was conducive to children's wellbeing, confidence and self-esteem. This contributed to good outcomes for children.

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

The provider and manager should continue to support staff so that they are fully informed of current early learning and childcare guidance so that more responsive, child-led learning experiences are created.

Reference: Building the ambition - hub.careinspectorate.com

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that, 'As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling.' (HSCS 1.30)

This area for improvement was made on 2 October 2019.

Action taken since then

Children were involved in leading their play and learning. The arrangement of resources and play materials were rotated and enabled children to make their own choices. Children were also supported to access the storage area to access play activities of their choice. Children also had free access to outdoor play that also enhanced their play experiences and wellbeing.

This Area for Improvement is met.

Previous area for improvement 2

Children should be supported to achieve their potential by effective management that promotes confidence in leadership roles, and provides on-going development and training of the staff team. This could be achieved through: a) the development of a central training plan that identifies individual and group learning needs that is effectively monitored.

- b) an evaluation of training as to how it has improved outcomes for children.
- c) a focus on practice that is discussed and shared between all staff.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that, 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14) and 'I am confident that people are encouraged to be innovative in the way they support and care for me.' (HSCS 4.25)

This area for improvement was made on 2 October 2019.

Action taken since then

Management provided good levels of support to staff on a daily basis. Staff were clear about their roles and responsibilities that supported smooth operation of the service so that children knew what to expect. There were opportunities to for staff to share their learning and practice and the manager had planned staff meetings well in advance with the needs of the staff in mind.

This Area for Improvement is met.

Previous area for improvement 3

The provider and manager should establish a continuous, manageable and effective system of self evaluation, that seeks the views of all those involved to improve outcomes for children.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that, 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve.' (HSCS 4.8) and '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 2 October 2019.

Action taken since then

Self-evaluation and improvement was focused on the involvement of children and families. Staff told us that they felt involved and consulted and also had autonomy to trial and make changes that had positive outcomes for children and families.

This Area for Improvement is 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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.