

# Castlehill Out of School Club Day Care of Children

Castlehill Primary School  
Ceres Road  
Cupar  
KY15 5JT

Telephone: 07894 802124

**Type of inspection:**  
Unannounced

**Completed on:**  
1 October 2024

**Service provided by:**  
Fife Council

**Service provider number:**  
SP2004005267

**Service no:**  
CS2022000386

## About the service

Castlehill Out of School Club offers a daycare of children's service for the local authority. They operate from Castlehill Primary school in Cupar, Fife. They are registered to provide care to a maximum of 56 children at any one time from an age to attend primary school to 14 years.

Children have access to a large gym hall, stage area, a breakout space off the hall, wellbeing garden and the school grounds. The service is close to local amenities, green spaces and can be reached by public transport links.

## About the inspection

This was an unannounced inspection which took place on 30 September and 1 October 2014 between 14:30 and 18:30. 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 registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with children using the service
- spoke with eight families during the inspection and received feedback from 12 via an online questionnaire
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- Children were happy, settled and having fun with peers and staff.
- Staff were respectful in their interactions; listened to children and promoted them to lead on planning activities and menu choices.
- Children were able to choose from a varied selection of resources.
- Children were consulted regularly on how to develop the service.
- Children had choice when to enjoy snacks as the service had implemented a rolling snack time. This meant their play was not disrupted.
- Staff promoted children's safety and wellbeing through effective systems to ensure they were supervised and accounted for.
- The service should review personal plans in line with guidance.
- Consultation with families should be evidenced to support their improvement journey.

## 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 kind, caring and nurturing interactions from staff. They were greeted with a smile and staff took time to ask how their day had been. Families said staff were friendly, welcoming, approachable and attentive and always show an interest in what matters to children. We could see positive attachments had been formed that helped children to feel secure and happy in the setting.

The mealtime routine ensured children's play and learning was not disrupted. Children chose when to eat at a time that was right for them. They were involved in menu planning. Staff used best practice guidance to support children to learn about healthy foods and used this to agree menu choices. Children had opportunities to develop life skills as they helped set up and prepare foods and spoke about keeping safe when using kitchen utensils. Snack was available for the full session as the service valued the importance of a rolling snack. This created a sociable, relaxed experience that promoted children's right to choose and have ownership of the routine.

Children had space to rest, relax and be with friends. Staff had listened to children's requests and purchased an indoor pop-up tent that meant they could access a quieter space to support their wellbeing.

Personal plans were in place and staff were supporting children to record what was important to them in their all about me booklet. We found this was not consistent for every child. Registration information and children's next steps on how the service will support their individual needs, wishes and choices should be reviewed with children and families every six months to ensure information is current. We signposted them to the Care Inspectorate guidance on personal planning (see area for improvement 1).

Children's health and wellbeing needs were clearly understood and managed by the team. They had processes in place that meant medication was reviewed regularly. We suggested information that is no longer needed be removed from files to ensure staff can access current information quickly to support children if medication needs to be administered.

Families are welcomed into the setting. Staff took time to talk with them about how their child has spent their time in the club. Nearly all families told us they know who the staff are and have strong connections with them. Staff told us they worked to improve communication with families. A termly newsletter was shared so families knew what children had been interested in and any planned events were shared in a timely manner.

### Quality indicator 1.3: Play and learning

Children were encouraged to lead their play and learning through planning systems that were interactive and responsive to what was important to them. Children put their ideas on the board using pictures and staff responded to this, providing the activities they required. Children told us staff listen to their suggestions and they help choose the equipment from the cupboard. During the visit we observed children asking for additional resources and staff responded.

This meant they were able to have ownership of their play and were engaged for sustained periods of time.

There was a strong ethos of children having choice and being independent. Staff listened to children, valued their ideas and responded to their needs. The importance of having fun in the service was at the heart of the experiences offered. Staff knew what was important to each child. For example, children enjoyed drawing, using whiteboards, creating models and playing educational games on the ipad. They told us they are listened to and are involved in planning activities. As a result, children had fun and enjoyed their time in the club.

Children were able to access the large outdoor space for the duration of the session. They played at the park and in the wellbeing garden. Children could also choose to create from a selection of resources from the new outdoor shed. Staff had collected various loose parts for indoors and outdoors as they valued the open-ended possibilities this offered children.

The service felt valued and included as part of the school community that supported positive partnership working. The club had designated boards in the space where children could share and celebrate their creations and achievements. This created a sense of belonging and inclusion for children and staff in the service.

Making use of the wider community had been limited due to staffing. The service recognised this and had consulted children on what they would like to take part in now staffing was able to support a breadth of outdoor experiences.

### Areas for improvement

1. To ensure children's information is up to date and reflect their current needs, wishes and choices. Personal plans should be regularly reviewed with children and families in line with the Care Inspectorate document, 'Guide for providers on personal planning'.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

### How good is our setting?

4 - Good

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

#### Quality indicator 2.2: Children experience high quality facilities

Children had access to the large gym hall, a stage area, toilet facilities and outdoors. They could choose to play at the park, enjoy green spaces and the wellbeing garden. Indoor areas were warm, bright, well maintained and provided children with opportunities to engage in activities that offered challenge. For example, children told us they liked using the gym bar and mats to practice gymnastics and climbing.

Staff carried out daily checks of the areas before children attended the service to identify any potential risks. This was clearly recorded on their daily risk assessment and meant spaces were safe for children to explore and play. We encouraged the service to look at how children could be more involved in developing

awareness of risk and how to keep themselves safe by using the Care Inspectorate Safe, Inspect, Monitor, Observe, Act (SIMOA) campaign.

Staff walked to collect children from another local school and used the school bus to transport them back to the club. Children were able to tell us about this routine. Staff were clear about risk assessments and their responsibilities to keep children safe during this transition.

The service was clean, and resources were of a good standard. Staff ensured surfaces were washed before children used these. Personal protective equipment was used in line with guidance, promoting children's health and wellbeing. Children enjoyed helping to set up the snack tables, taking responsibility for the area. Hand hygiene routines were embedded, and children spoke confidently about the importance of washing their hands at key times.

## 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 improvements and led well

Staff worked together to create their vision for the club that focused on it being a fun, inclusive service that families can rely on. They did this by offering children choices, respecting their rights and wishes. Children had been involved in agreeing the vision for their club through their promise book. They told us they respect everyone's opinion, listen to each other and promote kindness. As a result, there was a strong message that children mattered.

The service had a development plan that focussed on improving outdoor experiences, child led planning, individualised care and creating quiet, nurturing spaces. Evidence of consultation with children on the priorities were recorded in the floor book. We encouraged the service to include consultation with families. This would support their cycle of self-evaluation, identify what is going well and what families suggest could be improved (see area for improvement 1.)

The service was led by a committed leadership team who had a clear vision of what they wanted to achieve in the club to support children to thrive and flourish. The manager spent time regularly in the service, knew what was important to children and supported the team to drive forward improvements. They had procedures in place to promote a high standard that included quality assurance through auditing elements of the service. They recognised that the cycle of self-evaluation was at the early stages. We encouraged them to involve the staff in this process as it is important for them to engage in evaluating the experiences for children and families.

Staff engaged in regular training and team meetings to reflect on practice, plan for improvements and further develop their skills and knowledge. The manager supported this through regular professional development sessions that recognised strengths and areas staff would like to develop. This was important to continue developing a skilled work force.

### Areas for improvement

1. To ensure children continue to benefit from a service committed to improvement, they should consider how to gather the views of families to support their self-evaluation and quality assurance systems.

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

## 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

Children's wellbeing needs were carefully considered as there was appropriate staffing levels in the service. Staff were clear about their roles and responsibilities and deployed themselves effectively. Children were familiar with staff, enjoyed spending time with them engaged in activities of their choice. We could see nurturing attachments had been made that meant children had a positive experience. Children knew every member of staff by name and were happy to ask for support. They described staff as being "good at everything", "listen to them", "keep us safe" and "play fun games with us". As a result, children were happy and having fun in the club.

Staff skills, knowledge and experience complemented each other. There was a culture of care and respect. Staff told us they felt supported, included and valued. This contributed to the nurturing practice of the team in their approach to supporting children and each other.

Staff communicated well across the team. They used walkie talkies, and this allowed them to deploy themselves across the full provision so children could lead their play. Staff asked each other for support if a task took them away from an area. This ensured children were supervised and had staff near to respond to their needs.

There had been changes in the team previously that had impacted on the continuity of staff for children and families. Some families commented on this and said they would like to know about changes. The service had recruited new staff, and this has impacted positively on the team to promote consistency in care and support. The team have a shared vision and understanding about what they want children and families to experience, and this is having a positive impact on the relationships and outcomes for children.

Staff spoke about the positive experience they received through the planned mentoring programme. They commented on how all staff supported them and made them feel included and valued as a member of the team. The manager made effective use of the induction programme. They used this as a staff training tool for all staff as they recognised the importance of keeping up to date with current guidance.

Children and families benefitted from a team that were committed and passionate. Staff strived to deliver high quality care, play and learning through promoting children's rights, valuing them as individuals and offering engaging experiences.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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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