

Kidsize Kingswells OOSC Day Care of Children

Learigg, Kingswood Avenue
Aberdeen
AB158SB

Type of inspection:
Unannounced

Completed on:
2 October 2024

Service provided by:
Kidsize Club Ltd

Service provider number:
SP2018013156

Service no:
CS2018368265

About the service

Kidsize Kingswells OOSC is registered to provide a daycare of children service to a maximum of 73 children, no more than 32 children at any one time may be cared for at Learigg, Kingwood Avenue, and no more than 41 children at any one time in Kingswell Primary School. The service will operate between the times of 07:30 to 09:00 and 15:15 to 18:00 Monday to Friday during school term times. During In-service days and holiday care the service will operate from 08:00 to 17:30. The service operates over two sites which are within close range. Both sites are within easy access to the local amenities such as shops, library, woodland area and parks.

About the inspection

This was an unannounced inspection which took place on 1 and 2 October 2024, 07:30 and 18:15. Two inspectors from the Care Inspectorate carried out the inspection.

To prepare for 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:

- observed children using the service
- received feedback from families
- received feedback from staff
- spoke with the staff and management team
- observed practice
- reviewed documents.

Key messages

- Children benefitted from warm, caring, nurturing interactions and engagement with staff.
- Staff worked well together and had built trusting relationships with children and families.
- Good infection prevention helped keep children safe.
- The wider community was well utilised, and children accessed a variety of experiences.
- Medication procedures did not always follow best practice guidance. However, management were responsive to our suggestions and took immediate action.
- Quality assurance processes should be further developed to consider regular audits of key areas of practice.

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?	5 - Very 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 made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

Quality Indicator 1.1: Nurturing care and support

Children were settled, happy and confident in the setting. Staff were kind, warm and nurturing in their approach with children, and knew the children well. Most parents either strongly agreed or agreed that they are happy with the care and support their child receives in this service. A parent told us, "Great care is taken of the children, the snacks are healthy, and the kids are always entertained."

Personal plans were in place for all children and were completed in partnership with parents. The plans gathered the information staff needed to meet children's individual needs. However, some of the information had not been updated and did not reflect staff's knowledge of children in their care. For example, although staff knew children well and were able to talk about their needs, likes and interests, a child's all about me had not been reviewed for two years. In line with current best practice, all information in personal plans should be reviewed with families every six months as a minimum. This would ensure children experience consistent approaches from all staff, including new and relief staff members.

Children benefitted from a relaxed, unhurried and positive mealtimes. There were opportunities for children to be independent, which helped them to achieve and build life skills. For example, children were encouraged and supported to make their own toast and serve their own cereal. Staff sat with children whilst they ate and were responsive to their needs. This added to the relaxed atmosphere and promoted safety. Children were involved in the planning of snack, which encouraged them to make healthy choices supporting health and wellbeing.

Medication required by children was mainly stored safely and easily accessible by staff in an emergency. Care plans did not contain enough information on how to manage specific medical conditions. This information would support consistent approaches from staff in the event of an emergency. The manager has since reviewed medical care plans, ensuring they are specific, concise and contain the relevant information to ensure approaches are consistent and specific to individual children.

Quality Indicator 1.3: Play and Learning

Children were having fun and engaged in a variety of experiences. They had very good opportunities to lead their own play and learning, which impacted positively on their development and wellbeing. Children were seen to be playing and interacting well with each other and staff were skilled at recognising where support was required. As a result, children were included and engaged throughout the session. A parent told us, "My kids like to dance and build indoor dens, they are always encouraged and have resources available."

A balance of planned and spontaneous activities and experiences were available for children. Resources and activities were set out for children in response to their interests and wishes. A floorbook was being used to record some of the activities completed. We discussed evaluating this more frequently to help ensure children's interests are responded to quickly. More frequent recordings of evaluations and plans would further ensure children's interests are extended and make responsive planning processes clearer for staff moving between sites.

Opportunities to explore literacy and numeracy were naturally encouraged through play. Children benefitted from lots of opportunities to mark make, create and craft. Children were supported in making origami models by a staff member and they told us they enjoyed this activity. A range of developmentally appropriate books were available for children in the Learigg site, and we suggested this could be further extended to the site based in the school.

Opportunities for play and learning were enhanced through strong connections to their community. Regular visits to local play parks and woods supported children to feel connections to their local community. Children benefitted from sessions where parents were coming into the service to share their skills and knowledge. For example, an exercise class and emergency first aid. This supported children's knowledge of how to stay healthy and respond to an emergency.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

Quality Indicator 2.2: Children experience high quality facilities

Children benefitted from spaces that were comfortable and well ventilated. There was ample space to move around, and children could access resources to meet their needs and interests. Since the last inspection, the service had moved one of their sites to a recently renovated bungalow. This had been completed to a high standard and there were some homely touches, for example, a sofa and rugs. Management had identified there was scope to develop this further and we suggested this could be developed in both sites.

Children had access to a range of resources indoors and were able to make independent choices during free play. Most resources were easily accessible and developmentally appropriate. There were some open-ended and real-life resources promoting children's curiosity and creativity. There was scope to develop this further, for example, in the home corner and outdoors. We signposted the service to the 'Loose parts toolkit' on the Care Inspectorate Hub.

Children benefitted from free flow access to the outdoor spaces. Children enjoyed their play outdoors and the fresh air in secure playgrounds. They enjoyed ball games, offering them opportunities to be active and healthy.

Risk assessments in place considered the potential risks, benefits and mitigations. These had been recently updated. We advised a risk assessment should be undertaken for the fire exit in the school site as children had to pass this to get to the enclosed playground area. Children were seen to be involved in risk assessing processes and were partaking in some risky play, for example, jumping and climbing outdoors. This supported children's understanding of risk and how to keep themselves safe.

Infection control procedures supported a safe environment for children and staff. During food preparation and serving, staff followed best practice guidance and carried out effective cleaning of tables before and after snack. We observed children being supported to understand the need for good hygiene and hand washing at necessary times. This supported children to be safe and healthy.

Children's personal information was stored securely to ensure families privacy. Information was accessible to relevant staff whilst remaining confidential.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, when taken together, clearly outweighed areas for improvement.

Quality Indicator 3.1: Quality assurances and improvements are well led

The service's vision, values and aims were shared in the service and on their website. These were 'making friends, having fun and learning more'. These had been recently reviewed with children and families, supporting them to feel valued and included.

Children and families' views were actively sought to inform the development of the setting. A parent commented, "We are always asked for feedback or ways to make the experiences better". Formal and informal consultations with families provided opportunities for them to influence service delivery. Feedback from parents led to improvements to resources. We suggested changes made as a result of feedback received from children and families could be feedback. This would further support them to feel included and involved.

Quality assurance processes were in the early stages of development. There were some audits of staff practice being completed and fed back to staff, further supporting their development. We suggested a quality assurance calendar could be used to support planned and methodical audits of key areas of practice. Audits of areas such as personal plans, medication and accidents and incidents would further support quality assurances and positive outcomes for children.

An improvement plan had been developed which focussed on areas identified through self-evaluation processes. Self-evaluation was supported using best practice documents such as 'The Quality Framework'. These processes supported the staff team to identify strengths and areas to be developed. The key improvements planned were Safer Staffing, children's rights, indoor and outdoor environments and staff communication. Past improvements had been maintained, resulting in positive outcomes for children.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 4.3: Staff deployment

Children's wellbeing was supported by compassionate and responsive staff who knew children well. There was a mix of experience, knowledge and skills within the team. The staff worked well together and showed respect towards each other, creating a happy and relaxed environment for the children and families. A parent told us, "Staff are always friendly and polite, they talk to you about your child and life in general at drop off and pickup."

Children's safety was appropriately managed during the inspection as staff deployed themselves well within the premises and outdoors in the playground. They moved responsively to ensure they maintained an overview, whilst providing one to one support for children when needed. A parent told us, "The children are well looked after, encouraged in all activities and always have a happy experience."

Staff were safely recruited and there was an induction in place to familiarise new staff with the service. Current induction processes were a checklist of things new staff needed to know. We signposted the service

to 'The National Induction Resource' on the Care Inspectorate Hub to further support reflection and positive outcomes for children and families. The manager was aware of this and discussed plans to use in the future.

Staff had undertaken core training and had identified further training that they would like to undertake to enhance their knowledge and support their practice and outcomes for children. Staff should be supported to evaluate and reflect on this learning and its impact on practice. Evaluations and reflection should be recorded to allow staff to revisit this information and assess whether they have embedded learning into practice.

Regular appraisals and one to one meetings supported staff to reach their full potential. Individualised goals had been identified for staff. These could be developed further by ensuring they are specific, measurable, achievable, relevant and timely.

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

Requirements

Requirement 1

In order to ensure that distressed children are supported a sensitive and caring manner so that they learn to regulate their own behaviour the provider, manager and staff must:

- review and update the services restraint policy to reflect current best practice
- continue to develop their knowledge and understanding of positive and restorative strategies
- develop effective personal plans at an early date in collaboration with parents, carers and children to ensure that they are clear what strategies would support good outcomes for the individual child
- ensure that everyone adheres to the agreed personal plan to ensure a consistent approach.

By 2 October 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standard 4.11 which states that: "I experience high quality care and support based on relevant evidence, guidance and best practice".

It also complies with Regulations 4 (1)(c) and 5 (1) and (2) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 16 September 2020.

Action taken on previous requirement

The service no longer have a restraint policy in place. Procedures for managing behaviours were seen to be restorative and gave children time and space to process their feelings. Staff were seen to be nurturing and supportive. Staff spoke about strategies to support children's needs and all children had a personal plan in place.

Met - outwith timescales

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 the continuous improvement of the service the provider should ensure that an effective system is in place for assessing the quality of the service and then develop a detailed and effective improvement plan.

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 robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 16 September 2020.

Action taken since then

The service are using current best practice guidance to support the self-evaluation and quality assurance of the service. This is highlighting what is going well and what may require further development. This data is being used to develop a robust and informed improvement plan.

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	5 - Very 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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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