

Networking Key Services Limited (NKS) Day Care of Children

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Telephone: 01312 211 915

Type of inspection:

Unannounced

Completed on:

5 August 2024

Service provided by:

Networking Key Services Limiuted

Service provider number:

SP2003002988

Service no:

CS2003012096



About the service

Networking Key Services Limited is a daycare of children service based in Tollcross, Edinburgh. The service is registered to provide a care service to a maximum of 30 children at any one time, aged from three months to 14 years of whom no more than nine are under two years.

During the inspection, the service was operating with around seven to nine children each day. Older children did not use the daycare service. We have asked the service to consider reviewing the conditions of registration to reflect the children attending.

Children are cared for across two playrooms, one on the ground floor and one on the top floor of the building. During the inspection, all children were cared for in the top floor playroom. There are toilet and changing facilities on the ground floor.

The service also operates groups for members of the community and various other support services.

The service is close to local primary schools, shops, parks, and other amenities.

About the inspection

This was an unannounced inspection which took place on Tuesday 30 July 2024 between 09:30 and 13:25. We returned to the service on Thursday 1 August 2024 between 09:30 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate. During the second visit, one inspector visited the service.

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 and observed their experiences
- received feedback from seven families through questionnaires and spoke with one parent onsite
- spoke with the staff and management team
- observed practice and daily life
- reviewed documents.

Key messages

Children benefitted from warm and supportive attachments with staff.

Staff supervised children well, helping to maintain their safety.

Children and families benefitted from a homely and welcoming environment.

To ensure children and staff are safe and secure, improvements were needed to the security of the building.

Nappy changing and toilet facilities needed to improve to support children's independence and wellbeing.

To support key areas of the service to develop, quality assurance processes needed to improve.

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?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
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?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality indicator 1.1: Nurturing care and support

Children benefitted from positive relationships with staff. Staff were friendly and welcoming, helping children to feel included. Cuddles and comfort were offered. This showed children they were loved and valued. Staff supported children to manage routines and play. For example, they spoke children through routines helping them to predict what was happening. At times, staff missed opportunities to promote a rights-based approach to supporting children's emotions. For example, they tended to remove items that children were disagreeing over rather than helping children to navigate these feelings. This practice had the potential to reduce children's sense of wellbeing and fairness. Training and learning in relation to child development and emotional wellbeing could support staff to further develop their skills to enhance outcomes for children. We signposted the service to resources such as, 'Voice of the Infant: best practice quidelines and infant pledge' (Scottish Government, 2023).

Overall, mealtimes were relaxed and unhurried experiences. Staff knew children's needs and likes meaning they could offer appropriate supports. For example, children that needed extra encouragement were provided this in a kind way. Staff sat with children during meals. This practice aided supervision and helped promote children's social skills.

Staff knew children well and were able to support them with aspects of their care. Effective communication with parents meant staff followed children's routines and preferences. One parent said, "My relationship with the nursery staff is incredibly positive and supportive. This close-knit and trusting relationship has greatly contributed to making the nursery feel like a second home for my children."

Personal plans held key information that enabled staff to get to know children. Children usually had an enrolment form and supporting care plan that outlined their likes, needs and preferences. However, plans were not always reviewed and updated over time and did not always record how children's needs would be met. This meant there were missed opportunities to plan targeted care and support. During the inspection, we discussed the use of suncream for children. The service should ensure children's personal plans outline how children are kept safe in the sun. For example, suncream permissions should be sought and parents should be informed on how the service will effectively protect children from the sun. To support children's care, the service should further develop the approach to personal planning. This should include ensuring that plans are reviewed with parents so they can be meaningful, working documents (see area for improvement 1).

Children's sleep preferences were followed. For example, babies were soothed to sleep in a manner that reflected their needs. Overall, the room, mats and bedding provided were comfortable and safe. However, some children were provided with a fleece blanket on a particularly warm day. This had the potential to impact on children's comfort and wellbeing, should they overheat. To support children to experience consistently safe and comfortable sleep arrangements, the service should review and update their sleep procedures to help guide staff.

Quality indicator 1.3: Play and learning

A varied range of resources provided some children with choice in their play. Within indoor spaces children enjoyed roleplay, construction, playdough and other experiences. The range of materials and experiences supported some children to engage in sustained play. For example, children using playdough developed their ideas and enjoyed serving cakes to the staff and their peers. Outdoors children had good opportunities for energetic, physical play. Bikes and balance beams supported children's confidence and wellbeing. One parent said, "We try to repeat activities at home which my child has learned in nursery. Especially painting and bike riding." A well-resourced mud kitchen enabled children to explore materials and lead their own play. Some real-life items like a microwave at the mud kitchen and watering cans at the water station encouraged children to be creative and develop life skills. During these play experiences, children were busy and engaged.

While children enjoyed playing outdoors, their access to this was limited by the layout of the building and the routines of the day. For example, across both visits children only spent 30 to 40 minutes outdoors. One parent commented that they would like "more outdoor activities." The service should support staff to consider ways to enable children greater access to outdoor play experiences. This is to promote their play, learning and overall wellbeing.

Most staff had fun with children showing them that their play and ideas mattered. Some staff made helpful and inviting suggestions that supported children to be creative or extended their play. However, some staff took a more supervisory approach to children's play, which meant they missed opportunities to engage and extend learning opportunities. To enhance the quality of children's play, staff needed further opportunities to gain experience learning about provocations, schemas, and skilful questioning approaches.

Planning approaches could be further developed to create more interesting, motivating and child led experiences. During the inspection, staff had planned experiences and activities based on summer, but it was clear from observing children that they had other interests that could be explored. For example, one child was showing a keen interest in dance and music. While staff recognised this, they did not respond with ideas or activities that would extend learning. As a result, there was a missed opportunity to harness children's creativity.

Staff were beginning to track children's learning and progress. Through observations staff had identified some learning goals for individual children. However, the quality of observations varied. While some staff had noted down the children's activities, they did not consistently identify the learning that had taken place or how they would support children to make progress. The manager had begun sourcing training and working with staff to develop their skills in recording quality observations and using these to support children's learning and development. This work should continue to ensure staff can consistently identify children's achievements and plan meaningful next steps for their development.

Areas for improvement

- 1. To consistently meet children's needs and plan responsive care, personal planning approaches should be improved. This would include but not be limited to:
- ensuring plans are reviewed and updated with parents every six months or sooner if required,
- ensuring staff regularly consult children's plan and record information that helps them to understand children's varied and changing needs.

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

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality indicator 2.2: Children experience high quality facilities

Play experiences and spaces for younger children needed further development. Due to a reduction in children attending, staff cared for all children in one large playroom on the top floor of the building. This space was primarily set up for older children's play. While staff added some resources for babies and younger children, overall their play experiences were more limited. For example, they had access to books and treasure baskets but could not actively engage in sensory play as the equipment on the top floor was not right for their age and stage of development. Staff kept children safe by providing a comfortable area with some resources for younger children, but overall, this practice limited children's choices and experiences. One parent said, "Increasing the number of rooms would not only accommodate more children but also allow for smaller, more age-specific groups. This could lead to more tailored activities and a quieter, more focused environment for different age groups." To ensure all children have access to developmentally appropriate spaces that promote their play and learning, the service should review and improve the provision for younger children and babies (see area for improvement 1).

The environment was clean and homely. Furnishings such as cushions, rugs and child size seating helped to create comfortable spaces for most children to relax, sleep and play. The decoration was in a good state of repair and the service had upgraded carpets. Indoors spaces were clutter free, helping to reduce hazards. Children had space for their belongings and their artwork was attractively displayed. This contributed to children experiencing a welcoming and homely environment.

Since the last inspection, the service had added a new handwashing facility and a child-sized kitchen work top to the top floor playroom. These improvements supported children's independence and allowed them to practice skills, such as handwashing and baking.

Overall, children were safe as staff provided effective supervision and the primary areas used by children were secure. For example, the main playroom door had a locking system and when playing in the garden staff ensured gates were secured. However, we had some concerns about the safety and security of the general building. At times, the exit and entrance doors were left unlocked and unsupervised. This had the potential to enable unauthorised visitors to access the building unnoticed. Furthermore, window locks were not in place. During the inspection, the manager took some immediate action to address these concerns. However, to ensure children are consistently safe and secure, the provider should improve the approach to safety and security within the building (see area for improvement 2).

While some areas of the building had been upgraded since the last inspection, the toilet and nappy changing facilities did not support children to experience positive and effective personal care. Most of the time children were cared for on the top floor of the building, however, all toilet and nappy changing facilities were based on the ground floor. This meant that children were unable to access the toilet easily and independently. This could impact children's personal care needs and over time could impact on good bladder health. Also, nappy changing facilities were not in line with current good practice as there was a flushing

toilet in the nappy changing area used by children under two years. This layout can impact their health and well-being as young children are more susceptible to airborne germs. Children need to have easy access to suitable toilets and changing facilities. To effectively support children's health and wellbeing, the provider must plan to improve the facilities (see requirement 1).

Requirements

1. By 25 November 2024, the provider must demonstrate how they will ensure nappy changing and toilet facilities protect children from the risk of infection and support children's comfort and independence.

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

- a) submit a plan to the Care Inspectorate of how they intend to improve nappy changing and toilet facilities for children and meet best practice guidance.
- b) The provider must detail a reasonable timescale within which the improvements will be made.

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: 'If I require intimate personal care, there is a suitable area for this, including a sink if needed (HSCS 5.4) and 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.18).

Areas for improvement

1. To ensure all children have access to developmentally appropriate spaces that promote their play and learning, the service should review and improve the provision for younger children and babies.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS, 5.23) and 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS, 1.25).

- 2. To ensure children are safe, improvements should be made to the security of the building. This would include but not be limited to:
- reviewing entry and exits points and liaising with external agencies to ensure these meet good practice,
- ensuring doors are secured so that unauthorised visitors cannot enter the property,
- ensuring the repair and upkeep of window locks.

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).

How good is our leadership?

3 - Adequate

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We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality indicator 3.1: Quality assurance and improvement are led well

The manager and staff team created a welcoming and inclusive atmosphere that helped parents and children to feel relaxed and happy. The service's aims and objectives were reflected in the work of the staff team and manager. For example, the warm and welcoming interactions reflected the aim of nurturing individual children's development.

Most families agreed or strongly agreed that they could influence change within the setting. One parent said: "They are always available to respond face to face, over the email or phone call. If I have any issues or want to discuss anything with them. They are always accommodating and give lots of care to my little one." The manager and staff gathered feedback from families through daily dialogue and yearly questionnaires. The service used this feedback to influence changes. For example, families had requested more opportunities to meet others and engage with the service. As a result, a family fruit picking trip had been arranged during the summer months. This showed parents that they were included and valued.

The service improvement plan highlighted priority areas based on the needs of the service. This helped to shape improvement and provided staff with a clear understanding of the areas they were working on. For example, the manager had supported staff to develop their practice in assessing and monitoring children's learning and next steps. While this work needed to continue, initial improvements had been made. To ensure that improvements are further developed and embedded, the manager and staff team should evaluate the progress of improvements over time and plan next steps based on these assessments. This is to ensure a cycle of continuous improvement based on relevant good practice guidance.

Some aspects of the service's quality assurance processes were leading to improved outcomes. For example, the service had used an environmental toolkit to help improve the quality of resources for children. However, other aspects of quality assurance needed to improve. For example, the service did not have a good system in place to check staff professional registrations and maintain children's personal plans. Also, the service did not have an effective system in place to report and action some maintenance issues. While some aspects of quality assurance were supporting positive outcomes, further work was needed to ensure all quality assurance systems were robust and effective (see area for improvement 1).

Areas for improvement

1. To support high quality outcomes for children and families, the service should improve and embed effective quality assurance processes that monitor the quality of the service and support improvements to be made.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: '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 outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

Staff supervision of children was effective, helping to ensure their safety and wellbeing. Staff were available in sufficient numbers to enable children to be comfortable and reassured. A staff member told us, "The nursery continuously monitors how many children will be at the nursery on any given day and makes sure there are enough staff for all children." However, during our second visit, the lunch time experience was less relaxed as there were some younger children in attendance. While children remained safe and relax, the experience was less social as staff had to focused on helping the younger children. The service should review staff deployment during busier times to ensure mealtimes are consistently positive, social experiences.

Low levels of staff turnover meant children were cared for by familiar adults, which helped promote positive attachments. One parent said, "We've had the same staff since our child started nursery two years ago. We fully trust them, and we know they care about our child and know them well. They are very calm and experienced." The service used in-house bank staff to cover planned and unplanned absences. This meant children were cared for by adults who knew them and the routines well.

Staff knew that effective communication was important when caring for children. As staff worked across two shift patterns a communication diary was introduced to help them share information. This was working well as staff were aware of children's experiences across the day and used this information to ensure their wellbeing.

There was a mix of skills and qualifications across the staff team. The manager used team meetings and one to one support sessions to enable staff to reflect on their practice and assess training and learning needs. Recent training in child protection and first aid supported staff to understand their role in keeping children safe and protected. To support staff further the service should ensure training and learning opportunities expanded to aid staff development. For example, the manager was aware staff would benefit from opportunities to develop their practice, knowledge and skills in relation to supporting children's rights and play and learning.

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

4.3 Staff deployment

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	3 - Adequate
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good

4 - Good

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