

# Rocking Horse Nursery SCIO Day Care of Children

49 College Bounds  
Aberdeen  
AB24 3DY

Telephone: 01224 273 400

**Type of inspection:**  
Unannounced

**Completed on:**  
2 October 2024

**Service provided by:**  
Rocking Horse Nursery SCIO

**Service provider number:**  
SP2023000238

**Service no:**  
CS2023000361

## About the service

Rocking Horse Nursery SCIO Aberdeen operates from a purpose-built, environmentally-friendly building within the campus of the University of Aberdeen.

It is registered to provide a care service to a maximum of 84 children not yet attending primary school at any one time:

- no more than 21 are aged under two years
- no more than 25 are aged two years to under three years
- no more than 63 are aged two years to those not yet attending primary school full time.

Adult:child ratios will be a minimum of:

- under two years - 1:3
- two years to under three years - 1:5
- three years and over - 1:8 if the children attend more than four hours per day

or

- 1:10 if the children attend for less than four hours per day
- if all children are over eight years old and over 1:10.

The outdoor space has been taken into account when agreeing the maximum number of children aged from three years. Children must have access to the outdoor space at all times.

## About the inspection

This was an unannounced inspection which took place on 1 and 2 October 2024 between 09:00 and 18:30. The inspection was carried out by two inspectors 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.

In making our evaluations of the service we:

- interacted with children using the service
- spoke with two of their parents/carers
- spoke with staff and management
- received 19 completed questionnaires (this includes all types)
- observed practice and daily experiences
- reviewed documents.

## Key messages

- Children were cared for by kind staff.
- Mealtimes could be improved to better support children's experience and safety.
- Play and learning experiences were not always planned to provide children with challenge and opportunities to consolidate their thinking.
- The nursery had been painted and the nappy changing facilities refurbished.
- The large and spacious garden provided daily opportunities for play in a natural environment.
- Babies would benefit from a cosier and more homely environment.
- Some self evaluation and quality assurance had been undertaken but had not fully impacted on service provision. This should be developed further in order to improve outcomes for children and to support continuous improvement of the service.

## 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?	3 - Adequate

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, where strengths only just outweighed weaknesses

### 1.1 Nurturing care and support

Friendly and welcoming staff greeted children and their families. Staff used warm tones when talking to children and children were cuddled and soothed when upset. This contributed to most children being happy and settled.

Children's personal plans had undergone changes and were in the process of review. Most parents 'agreed' that they were involved in developing their child's personal plan and provided key information to support their overall health and wellbeing. However, for a few children information about their interests and preferences was not used well to help them settle and grow in confidence. Additional support plans were in place for some children. However, identified strategies were not always specific and easy to follow. This raised the potential for inconsistent care and children who were not appropriately challenged to reach their full potential (see area for improvement 1).

Children's wishes and choices were not always respected when supported in their personal care. On a few occasions, children were carried by staff in order to follow routines. Some babies wore only their vests for significant periods of the day, including when eating, sleeping, and playing. This did not support their dignity or comfort. We discussed these concerns with the manager and children's experiences improved on day two.

Children experienced inconsistent snacks and mealtimes. Children were offered fruit-based snacks and enjoyed chatting with their peers and staff. There were some opportunities for older children to prepare the fruit and pour their own drinks. This supported their self help skills and independence.

Lunches were nutritious and looked and smelt appetising. Any allergies, food preferences, and intolerances were well catered for. Children were provided with an alternative if they did not like the food offered, ensuring no one went hungry. However, some of the babies and younger children sat too long while waiting for their lunch to be served. This meant they were contained and not actively engaged in play and learning. Most children were well supported by staff. However, on a few occasions, staff did not sit with the children when eating. This led to poor supervision and raised the potential risk for choking. We raised our concerns with the manager and children's experiences improved on day two (see area for improvement 2).

Children's safety, emotional security, and wellbeing were supported through sensitive arrangements for sleep routines. Babies slept in cosy cots and older children slept on mats on the floor. Baby monitors were used well to keep babies safe when sleeping. Staff soothed children to sleep and were vigilant in their supervision as they slept.

Staff were knowledgeable in the safe administration of medication. A minor discrepancy in the recording of children's medication was addressed immediately to keep children safe and well.

### 1.3 Play and learning

Children playing outdoors were engaged and enjoyed exploring and playing with loose parts and natural materials. This supported their learning through problem solving and creative play. Parents commented, "They like playing in the huge garden, running up the hill, rolling blocks down the hill, playing in the mud kitchen, balancing over an obstacle course".

Indoors, children were not always purposefully involved in leading their play. There were not enough sensory experiences for babies to explore and stimulate their curiosity. On a few occasions, there were not enough resources on offer for toddlers, contributing to a few children who were upset. In the three to five room, there were not enough age-appropriate, exciting experiences to engage and sustain children's interests. Group times were too long and some children lost interest. On occasion, the high level of noise in some rooms did not promote a positive and purposeful learning environment (see area for improvement 3).

Planning approaches to support children's learning were in the early stages of change and development. Observations were inconsistent and identified next steps in children's learning were not used effectively to inform planning. As a result, children did not always experience stimulating and challenging play and learning (see area for improvement 3).

Staff provided children with praise and encouragement to improve their confidence and self esteem. However, effective questioning to extend children's thinking, widen their skills, and consolidate their learning was not used consistently (see area for improvement 3).

Children benefitted from some opportunities in language, literacy, and numeracy development. Children were provided with books and enjoyed listening to stories and songs. There were some opportunities for early mark making and writing skills. Numbers were displayed to support recognition and counting.

Children's opportunities for play and learning were enhanced through strong connections to their own and wider communities. There were opportunities for babies to go for walks. Older children had made good use of the amenities within the University Campus, including visiting the zoology garden.

## Areas for improvement

1. To help ensure children are provided with nurturing support that meets their care needs and emotional wellbeing, the manager and staff should ensure children's personal plans contain clear and easy to understand strategies and staff use this information to effectively support them.

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).

2. To help keep children safe and promote their enjoyment of healthy eating and drinking, the manager and staff should improve mealtime experiences. This should include, but not be limited to, effective staff supervision and help when eating and limiting the time spent seated and waiting for lunch to be served.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected' (HSCS 1.34).

3. To support children's learning and development, the manager and staff should ensure children experience high quality play and learning relevant to their age and stage of development. This should include, but not be limited to, ensuring staff are knowledgeable and trained in using effective questioning to scaffold learning and extend children's thinking.

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 have fun as I develop my skills in understanding, thinking, investigation, and problem solving, including through imaginative play and storytelling' (HSCS 1.30).

## How good is our setting?

### 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

The nursery looked bright and welcoming. Information was displayed in the foyer to help inform and keep parents updated. At times, children's cloakrooms were not always tidy and parents commented that it was sometimes difficult to find their child's belongings.

The nursery had been painted and the nappy changing facilities refurbished to meet guidance. However, some areas in the environment looked less appealing and less cared for. For example, the windows were dirty and there were crayon marks on the woodwork. There was an unpleasant odour in one nappy changing area. Outdoors, litter accumulated near children's play areas and some resources were left in the secret garden to go rusty and unsafe for play. There were a few gaps under the boundary fence raising the potential for children to leave the setting unsupervised. We raised these issues with the manager who immediately contacted maintenance to check on the progress of this repair. Staff had already been informed and were vigilant in the outdoor area as part of their supervision (see area for improvement 1).

The indoor play environment could be improved to promote challenging, exciting, and stimulating play. There were some natural materials and loose parts to support imaginative and creative play. However, there were not enough real-life resources to support children's learning through familiar and everyday experiences (see area for improvement 2).

Babies were able to play with some good quality age-appropriate resources. This meant most babies were happy and content. However, to support babies settling and to help them feel safe, improvements should be made to the environment. We suggested creating more cosy spaces and adding soft furnishings and soft lighting to create a warm and comforting atmosphere. There was not enough comfortable seating to support feeding or provide cuddles and loving care. The walls and ceilings looked sparse and would benefit from some artwork or photographs of family and friends (see area for improvement 2).

The outdoor play area was large and attractive. It was grassed, providing lots of opportunities for children to learn about the natural world. Children had fun running up and down the slopes and problem solving using loose parts. They were proud to show us their garden area where they had been growing fruit and vegetables.

Children's privacy was protected by the safe storage of their information, including electronic and paper files.

## Areas for improvement

1. To keep children safe, well, and free from infection, the provider and manager should ensure the building and garden are well maintained.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.24).

2. To support children's comfort, learning, and development, the provider and manager should ensure the environment offers children a range of rich stimulating play resources within a cosy and comfortable environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes, and choices' (HSCS 5.23).

## How good is our leadership?

### 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

The vision, values, and aims of the setting were not fully reflected in practice. However, leaders were beginning to initiate well informed change to reflect the aspirations of the children and families attending. Staff, children, and parents had some involvement in this process and this should be continued.

There were some opportunities for children and their families to be involved in the development of the service. Parents were asked for feedback and given opportunities to meet with staff. Overall, feedback to the service was positive and parents were happy. Other ways to share information included newsletters, play-and-stay sessions, and questionnaires on the service provision. Parents were encouraged to take part in fundraising initiatives and family fun events. This meant most parents felt involved and well informed. However, a few parents felt there were not enough opportunities to share their views. Innovative ways to capture parent opinion and share the outcome of any changes should be further developed.

The children's voice was reflected through their choice of resources and where to play. This should be further developed through experiences planned to meet their interests and life experiences.

The management team were committed to developing the service through self evaluation and improvement planning. They identified that embedding children's rights as part of quality improvement will promote children's wellbeing. Guidance and support from Aberdeen City Council will be beneficial in implementing this into practice. Staff have contributed to the evaluation processes through staff surveys and as part of group meetings and individual supervision meetings. The management team will try other methods to encourage the staff team to participate in the evaluation process (see area for improvement 1).

Quality assurance processes and procedures were not effective to identify inconsistencies in practice. Audits of accidents and incidents helped keep children safe and well. However, some areas of provision, such as inconsistent mealtimes, had not been identified. Inconsistencies in staff interactions had not been addressed in order to ensure positive and supportive outcomes for children (see area for improvement 1).

## Areas for improvement

1. To support improvement to the service and ensure good outcomes for children, the manager should ensure self evaluation and quality assurance of the service are embedded in practice and involve all stakeholders to bring about positive changes and sustained improvement.

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).

## How good is our staff team?

### 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Staff had built positive relationships with children and families. Most parents 'strongly agreed' or 'agreed' that they had a strong connection to staff. Comments included, "Staff are very nice, always make you feel welcome" and "Every member of staff we have ever interacted with has been kind, friendly, and had known about our child. They all know who we are and who [child] is and make us all feel welcome".

Children were supported by a staff team with a mix of experience. Recently recruited staff were supported with an effective induction to help develop their skills and confidence. Some staff had worked at the service for several years and shared their experience by mentoring and supporting colleagues. This contributed to most children receiving the care and support they needed.

The approach to staffing meant there were enough staff to keep children safe and well. Staff absences were minimal and staff were flexible and willing to cover absences, if needed. This meant children were cared for by staff who knew them well. Staff breaks were well planned and did not impact on the supervision of children at busier times of the day.

Children were supported by a team who worked well together. Staff told us they enjoyed working at the setting and described their relationships as being part of a family. They communicated throughout the day to keep each other informed of their whereabouts. On a few occasions, staff communication could have been better to ensure quality engagement with children. For example, at mealtimes staff did not take responsibility for quickening the pace or to sit and support children.

Staff had undertaken some professional development to improve service provision. This included visiting other settings, reading, and attending training courses. As a result, staff were very enthusiastic to develop the outdoor learning environment. In order to promote and sustain quality care and outcomes for children, staff should continue to access training, guidance, and practice documents.

## 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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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