

Wallyford After School Club Day Care of Children

Wallyford Primary School
Futures Way
Wallyford
Musselburgh
EH21 8FF

Telephone: 01316 652 865

Type of inspection:
Unannounced

Completed on:
6 November 2024

Service provided by:
Edinburgh and Lothians Out of School
Care Network

Service provider number:
SP2004006939

Service no:
CS2006117126

About the service

Wallyford After School Club is registered with the Care Inspectorate to provide a care service to a maximum of 70 children at any one time who attend primary school.

The service is one of nine registered out of school clubs operated by Edinburgh and Lothians out of School care network (ELOSCN).

The club operates in Wallyford Primary School in the town of Wallyford, East Lothian. The club have access to a large gym hall, kitchen, storage area and the school playground.

About the inspection

This was an unannounced inspection which took place on 29 and 30 October 2024. 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, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with some children using the service
- reviewed comments from 16 families
- spoke with staff, the manager and managing director
- observed staff practice and experiences for children
- reviewed documents.

Key messages

- Children were having fun and had developed good relationships with staff.
- Very good opportunities were provided to support children's physical health and emotional wellbeing.
- Methods for recording the play experiences and outcomes for children could continue to be improved.
- Staff were continuing to develop the environment to make it welcoming and engaging for children.
- The manager needed to continue to develop their methods for self-evaluation.
- Children were very well supported by the enhanced adult to child ratio.

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 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

We evaluated quality indicator as very good where significant strengths in aspects of the care provided supported positive outcomes for children.

Children were warmly welcomed into the setting by staff who were well organised for the start of the session. Children were keen to tell staff about their day and discussed with staff what they planned to do with their afternoon in the club. The interactions between staff and children were positive and respectful, there was laughter as staff and children joked with each other and children were confident and relaxed in the setting. Parents commented on the relationships between children and staff. 'Friendly staff, my child really enjoys his time there. He's occupied, happy and feels safe.' 'Every member of staff is nurturing and welcoming.' 'They always seem to cater for my child's needs intuitively and are able to tailor things to suit their needs.'

Children benefitted from the opportunity to have snack when they came into the setting. This was well paced and provided a meaningful social experience where staff could also 'check in' with children. Children were included in advanced planning of snack choices and were often involved in the making of snack or having opportunities for cooking and baking. Staff were aware of safety aspects of snack such as ensuring that children remained seated whilst eating and food hygiene procedures.

Children's individual wellbeing benefitted from the effective use of personal planning. A number of documents made up the personal plan and these included opportunities for children to provide information about themselves that they felt staff should know. Interactions between staff and children evidenced that children's individual needs were well known to staff. Support plans had been developed for children who needed them. These included specific health plans or adaptations needed to the environment or activities. Staff had worked with parents and the school to develop plans that were consistent for children. We asked the manager to ensure that they reviewed or adapted support plans regularly to ensure that they still supported positive outcomes for children.

The setting ensured that children's health and wellbeing needs were well supported. Consideration had been given to ensuring that children were healthy and active. The provider employed sports coaches who provided daily opportunities for children to learn new sports and develop a number of skills such as team work, determination and pride in their achievements. There was also a walking bus in the morning as part of the breakfast club. Children were working with Paths for All to challenge themselves to walk the 52 million steps round the world. Children's mental and emotional wellbeing was supported through Wellbeing Wednesday where they could take part in yoga, and discussions to develop a positive view of themselves.

Quality indicator 1.3 - Play and learning

Children were having fun on the day of our visit. There was a mixture of planned and free play experiences for children to choose. As it was close to Halloween there were themed activities which had been planned with children in advance. To accommodate the planned activities the range of play experiences was not as

wide as normal but staff ensured that if a child requested additional or different resources these were provided. Children we spoke with said that they always had things to do and that the club was 'never boring.'

During the session children could chose to play indoors or outdoors in the school playground. The range of outdoor resources enabled children to take part in a number of activities including using a wide range of loose parts, scooters, the school trim trail and sports and games organised by the sports coaches. The organisation had provided large wooden planters for children to develop an understanding of nature through planting, growing and taking care of plants.

Staff provided good support for play, especially outdoors where they actively played with children. Indoors they were on hand to support children with problem solving, supporting co-operative play and extending some of the activities by providing additional resources.

Staff were developing the procedures that they used to plan the experiences for children. This included consulting with children about what they would like to do. The use of floor books to record children's experiences needed some further development. This would enable staff to record with children the skills, fun and learning that was achieved through children's play.

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.

The club operated from part of the gym hall in the school. Children had access to the hall, a small side room, toilet facilities and playground. In addition, there was a large room for storage of resources and snack making facilities. Efforts had been made to make the environment welcoming and staff used large boards to display parent's information, staff details and some children's art work.

Staff had consulted with children to develop an area for the older primary classes. This area included the side room, a small area of the gym hall and enabled staff to provided a different range of resources for this age group. This was working well to help engage older children in the life of the club.

Work was continuing to ensure that the way in which the play space was laid out provided a pleasant place to play and relax. The space was challenging but staff had created a comfortable area with cushions and blankets for relaxation and zoned areas for play.

The resources and environment were clean and well maintained. Children were encouraged to respect their resources and report to staff if there was anything broken or needing replaced. Staff were aware of good infection prevention and control practice. Those who made snacks had carried out appropriate food hygiene training.

Children could choose to play indoors or outdoors throughout the session. This was well managed with the use of walkie talkies to ensure children's safety. Along with encouraging children to be responsible for their safety staff were good at supervising children and were aware of where they were at all 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 improvement are led well.

The manager and staff had a vision for the setting that reflected improving outcomes for children. The staff practice in encouraging children to be responsible for their own behaviour and respectful of each other and of staff was part of their ethos to make the club an inclusive and fun place for children.

Children were regularly consulted with through discussion and opportunities to vote or make choices. The manager and staff were actively working on ways to make the consultation process fun and meaningful for children. Parents had some opportunities to influence the club. Staff talked to parents daily at pick up times and comments could be made on the Facebook page and through polls on Survey Monkey. Overall, parents said that communication with staff was good and that they received information about their child. One parent commented that better use could be made of the Facebook page to share snack menus and more of what was planned for children.

Staff had opportunities to take part in team meetings. We suggested that these could be more effectively used to provide opportunities for reflective practice discussions and enable the staff team to contribute to the agenda. Minutes of the team meetings needed to be in more depth to ensure that responsibility for actions was clear and to enable those who did not attend the meeting to have an overview of discussion and outcomes.

The manager had begun the process of self-evaluation to influence areas of the club. For example, the addition of the primary 5, 6, and 7 space and the re-organisation of the cloak room. This now needed to be carried out in a wider context to develop an improvement plan for the club. We sign posted them to the scrutiny and improvement toolbox in the quality framework to assist with this work.

Senior staff in the organisation attended the club regularly as part of the auditing and monitoring process. Auditing of club procedures such as medication, accidents and incidents took place at a club level. We reminded the manager to ensure that this was effective in identifying gaps as well as strengths in practice.

How good is our staff team?

5 - Very Good

We evaluated quality indicator as very good where significant strengths in aspects of the care provided supported positive outcomes for children.

Quality indicator 4.3 - Staff deployment

Children were cared for by staff who understood their roles and supported each other well. Parents commented positively about the staff team. 'There is always numerous members of staff with a very good ratio of staff to kids and there is always a member of staff available when myself or child need to speak to someone.' 'I can't state enough how helpful and extremely professional the staff are. Since my child has attended here it has been fantastic and is really helping develop their social skills.'

Staff knew children and their needs well. The provider organisation had ensured that there was a consistent staff team at both the after school club and the breakfast club. This had supported children to make secure relationships with staff who they trusted. The very good adult /child ratio ensured that children were very

well supervised and that children could have the choice of indoor or outdoor play and be well supported through their time in the club.

Children were well supported through the transitions which took place over the course of the session. Procedures were in place to ensure staff knew who was coming to the club and what to do if children did not arrive as expected. There was a Missing Child policy to support staff to take appropriate action when children did not attend as expected. Staff monitored the collection, at the end of the session, well and ensured that each parent/carer received some information about their child's afternoon in the club.

The provider organisation had supported the manager to ensure that the team comprised of staff who had a range of skills and experience. A very good range of training was provided for all staff, including the sports coaches, to ensure that basic training needs were met. This included child protection, first aid and food hygiene. Some staff were undertaking their formal childcare qualifications and a good range of additional courses had been made available to enhance a range of skills. This ensured that children were cared for by a professional and committed workforce.

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

Requirements

Requirement 1

By 01 February 2024 the provider must make provision for the health, welfare and safety of children. To do this the provider must, at a minimum:

- a) develop and implement a medication administration procedure which takes account of good practice and is understood by staff
- b) develop comprehensive medical care plans for children who require them.

This is to comply with Regulation 4(1)(a) (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 care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

This requirement was made on 20 December 2023.

Action taken on previous requirement

The organisation had re-developed the medication procedures to ensure that they were understood and followed by staff. As part of professional development all staff had read the new procedures.

At the time of our visit there were no children on prescribed medication. Discussion with the manager confirmed that they had a good understanding of the procedures to be followed if a child did need regular medication.

This requirement was met.

Met - within 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

Staff should develop child centred and responsive approach to planning activities for children. This should include taking account of children's comments and suggestions and staff observations of children's interests. The outcomes for children, during play, should be recorded to evidence fun and breadth of achievements.

This is to ensure that care and support are consistent with the Health and Social Care Standards (HSCS) which state: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27)

This area for improvement was made on 20 December 2023.

Action taken since then

The system for planning activities now took account of children's views and suggestions. Staff also observed children's play to provide extensions to play experiences. We comment in our report that some of the recording of play could improve but overall there was a better understanding of play and learning outcomes based on play types and skills.

This area for improvement was met.

Previous area for improvement 2

To support ongoing improvement and positive outcomes for children, the manager and provider should develop a culture of continuous improvement and effective processes for self-evaluation and quality assurance. This will enable them to develop improvement plans with staff, parents and children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I use a service and organisation that are well led and managed' (HSCS, 4.23) 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 20 December 2023.

Action taken since then

An action plan had been developed as a result of our last inspection. In addition the manager had recorded some aspects of the service which they assessed needed some improvement. This was well recorded to indicate assessment, action to make improvement and the outcome. We spoke to the manager about the need to develop this process into an improvement plan for the setting.

This area for improvement was met.

Previous area for improvement 3

To effectively monitor processes and procedures used in the club the system for auditing should be improved to ensure it is accurate and meaningful. This will assist the manager and staff to make improvements where necessary and ensure that processes which are in place to protect children health and wellbeing are being implemented.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I use a service and organisation that are well led and managed' (HSCS, 4.23) 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 20 December 2023.

Action taken since then

The manager was now more familiar with the process for auditing. This was carried out regularly and we could see that processes such as medication and accidents were audited to identify gaps.

This area for improvement was 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	5 - Very 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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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