

Ladybird Playgroup - Arbroath Day Care of Children

Brunton Block
Arbroath Academy
Glenisla Drive
Arbroath
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Type of inspection:
Unannounced

Completed on:
25 October 2024

Service provided by:
Ladybird Playgroup

Service provider number:
SP2003000571

Service no:
CS2003002877

About the service

Ladybird Playgroup is registered to provide care to a maximum of 40 children. The age range of the children will be from two years to those not yet attending primary school. The service operates from Monday to Friday and offers mornings and afternoon sessions with some children staying for lunch. The service operates from a spacious building situated in the grounds of Arbroath Academy. Children have access to an extensive outdoor area.

About the inspection

This was an unannounced inspection which took place on 23 and 24 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- observed the children at play
- received questionnaire feedback from twenty-one families and eight staff
- spoke with staff and management
- observed practice and children's experiences
- reviewed documents.

Key messages

- Children were mostly happy, settled and confident in the setting.
- Children experienced caring interactions from staff which helped them feel safe and secure.
- Children were engaged in various play experiences and activities.
- Nappy changing facilities should be reviewed to ensure they are in line with best practice guidance to keep children safe and healthy.
- Staff deployment should be reviewed to support high quality outcomes for children.

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/people and clearly outweighed areas for improvement.

Quality Indicator 1.1: Nurturing care and support

Children attending the setting were mostly settled, happy and comfortable in the environment. They experienced kind and caring interactions, helping them feel safe. For example, staff offered cuddles and comfort when needed. Families shared with us, "My child is so happy to go and has blossomed and grown in confidence with the help and care they have received there" and "Staff are friendly, supporting and show real care for myself and my child. They are very compassionate to my child's needs and are all wonderful at their jobs".

Personal plans were in place for all children and contained important information to help meet their needs. For example, health, allergies and likes and dislikes. Key information was reviewed with parents. On the whole staff were knowledgeable about children's needs. Some plans had further information to help identify educational strategies to support children to progress. The manager should ensure that where any support strategies are identified, these are documented and consistently used by staff. This would support all children to progress.

Children's mealtimes considered children's preferences, allergies and likes. Children were offered breakfast, snacks, and lunch. Mealtimes were a sociable experience where children sat together. There were some opportunities for children to help prepare snacks and for children to self-serve their food, which helped promote their independence. The service should continue to review their approach to mealtimes to ensure that staff are fully focussed on children which would support a more relaxed experience.

Medication systems in place supported the safe administration of medicines. This was audited regularly by the manager. We asked the manager to ensure that the medication policy was in line with current guidance to fully support children's safety and wellbeing.

Quality Indicator 1.3: Play and learning

Children were busy and having fun. They shared with us that they liked making new friends, learning numbers, singing new songs, playing with their friends and colouring. Regular planning meetings provided opportunities for staff to come together to discuss children as individuals and planning. Planning approaches were child centred and responsive to children's interests. Planning was evaluated regularly by staff, however, further support or challenge for individual children was not identified consistently. The manager should ensure when planning is evaluated that any challenge and support is identified. This would support children to progress.

Children had daily opportunities for outdoor play and could access the outdoors for most of the session. This supported their overall wellbeing and social development. The large garden area provided opportunities for physical play, developing children's skills. For example, children enjoyed chasing each other on the bikes and going up and over the small hill. Resources in the outdoor areas supported children to develop their imaginations. For example, a group of children pretended they were pirates as they played together in the boat. Families shared with us, "My child absolutely loves being outside and loves the massive garden. The playgroup have taken the children to the park before which they loved. They do a lot of outdoor play/ learning and I think this is great for not only my child but all the children as I think outdoor learning is great for them. They're happiest when they're outside exploring the world around them".

Improvements had been made to support imaginative play by adding a dressing table and real life resources to the dressing up area. Children had access to some loose parts materials to support their curiosity, imagination and problem solving. We discussed that widening opportunities for loose parts play throughout the setting would further support children in leading their own learning.

We asked the manager to review the routines of the day. Children were unable to access different playrooms and areas of the garden for significant periods of the day. This would help support children's wellbeing, choices and wishes. The manager had already identified they would like to create more opportunities for staff and keyworker children to spend more time together to support children with their learning. This would further support planning approaches and ensure children's development is fully supported and challenged.

Children had some opportunities to develop their language and literacy skills through stories, singing, mark making and taking part in discussions. Some staff supported children through skilful interactions, commenting on their play and using meaningful and relevant questions to challenge their thinking.

Staff shared children's experiences with families through online journals. Families told us they liked seeing what opportunities their child had participated in. This supported families to feel included in their child's learning and development. On the whole, observations of children's play captured skills and learning and next steps were in place. Staff now need to ensure they are planning experiences to support and consolidate children's learning to ensure they are sufficiently challenged, and next steps are met. Families shared with us, "My child has recently had their first my world review. Their key worker was great at explaining where she thought their developmental needs were and how to achieve them. She was knowledgeable regarding two year olds and how to best care for their age and stage".

Links were in place with the local community which included providing a food larder. The manager and staff shared they would like to re-establish further links with the local community. This would enhance children's play and learning opportunities and contribute to their understanding of the world around them.

How good is our setting?

4 - Good

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

Quality Indicator 2.2: Children experience high quality facilities

A welcoming entrance supported families to feel that they mattered. Relevant information was displayed and each child had their own peg to store their bags and jackets, helping to support a sense of belonging.

Play spaces were bright and well-ventilated. The addition of some soft furnishings helped create cosy spaces for children to relax. For example, den, cushions, rugs and fairy lights. In addition, softer lightening throughout the other playroom would help contribute to a more homely environment.

Spaces took into account children's stages of development and learning. Resources supported learning and children's curiosities. However, some areas felt cluttered which meant there was a potential for children to become overstimulated. Some staff agreed and shared that they would like to tidy up the outdoor areas. Staff should review the environment and provide more exciting and natural resources to engage children. Consideration should be given to the presentation of toys and materials to ensure they are easily accessible and help children feel respected.

There were a variety of measures in place to contribute to a safe environment for children. For example, a secure entrance and gates. However, we identified where further action could be taken to help keep children safe. This included considering the positioning of resources in the outdoor area which may enable children to climb near boundaries.

Overall, the service was clean and well maintained. However, some infection prevention and control measures should improve to help minimise the potential spread of infection. Staff and children washed hands before eating and after nappy changing, however, handwashing was not consistently happening as children came back indoors from the garden. We noted that further improvements were needed within the nappy changing area to help ensure this meets best practice guidance and fully supports children's wellbeing. For example, there was no suitable ventilation and items were stored within nappy changing facilities. Nappy changing facilities should be designated for this purpose only. **(See area for improvement 1).**

Some risk assessments were in place to identify hazards and mitigating actions to minimise risks to children for activities, outdoors and play areas indoors. We asked the manager to develop an overall risk assessment for the indoor and outdoor environment to further support children's safety. **(See area for improvement 2).**

Areas for improvement

1. To ensure that children's health, safety and wellbeing is protected, the provider should improve nappy changing facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16) and 'My environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes' (HSCS 5.19).

2. To ensure the safety and wellbeing of the children, the provider should ensure that all risk assessments are reviewed and developed to include the level of risk, current measures in place to reduce risk and any further actions required.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.17).

How good is our leadership?

4 - Good

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

Quality Indicator 3.1: Quality assurance and improvement are led well

A vision, values, and aims was in place which was reflected across the service. The service was led by a manager in post for a year. They were keen to make improvements and delegated some responsibility to staff and involved them in the development of the service. Some staff had taken on leadership roles for different areas of the service. For example, planning and the floorbook. The manager should extend this approach to include all staff. This would support staff to further develop and share their skills and knowledge.

A quality assurance calendar was in place to support management. This highlighted various tasks that were to be undertaken throughout the year. Regular audits were done of paperwork including personal plans, medication and accidents.

An improvement plan identified relevant areas for development. The manager and staff undertook some peer monitoring and room monitoring to support development and improvements. This supported professional dialogue and ongoing improvements. The manager should further continue to develop, strengthen, and embed these approaches involving staff, parents, and children.

A variety of communication systems were in place to keep families informed about updates within the service. This included the use of an online app. Parents were also welcomed into the nursery on a daily basis and for stay and play opportunities. Regular questionnaires supported families to feel included. Families shared, "We are always consulted on what's going on and what's going to be happening, asking our views and what we would like to see happen".

How good is our staff team?

4 - Good

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

Quality Indicator 4.3: Staff deployment

A consistent, stable staff team helped ensure children felt safe. Staff were warm, caring and nurturing in their approach and were enthusiastic and committed to providing quality experiences for the children in their care. They promoted a happy, welcoming environment, where children and families were valued and respected. Staff shared, "I think we have a very strong team who have overcome a lot of change in the past year and now have a strong bond. I think the setting is stronger and more cohesive after dealing with changes over the past year. This is all to the positive. We have good relationships with our families, and we work very well to the needs of the setting".

Staff were confident about the child protection procedure and when to seek advice. The manager responded to any child protection concerns and reported these when required to relevant agencies. We reminded the manager to ensure notification are reported to the Care Inspectorate to help provide further opportunities for guidance and support.

Staff knowledge and skills were enhanced through a variety of training and professional development opportunities. Staff talked about how training supported them in meeting children's needs, providing consistency and effective support at the time it is needed.

Appropriate levels of staffing were maintained at all times. The deployment of staff on the whole supported the supervision and care of children. There were, however, a few occasions where staff deployment did not fully meet children's needs. For example, the positioning of staff outdoors did not always enable them to see the whole garden and at lunch when staff were quite task orientated. This resulted in some children becoming unsettled.

Overall staff communicated well with each other to ensure appropriate supervision promoted children's safety and engagement. Staff were responsive to children, supporting them meeting individual needs. We shared with the manager that on a few occasions staff could have communicated more effectively to meet children's needs.

The staff knew the children and their families very well and worked to ensure every family was welcomed and valued. This contributed to creating a caring ethos. Staff had regular communication with parents and had established positive relationships, which enhanced children's experiences and promoted a partnership approach. Staff shared with us, "I feel like I have good positive relationships with the parents, I build these up at stay and play sessions or on drop off and pick up at the door. My key worker children's parents have regular updates with me, sharing the children's learning with them on learning journals and during the children's my world reviews".

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

In order to ensure that people get the medical treatment they need, the manager should put in place an effective and timely system to review and update medical protocols.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 18 March 2019.

Action taken since then

Medication systems were in place and supported the safe administration of medicines. This was audited regularly by the manager. We asked the manager to ensure that the medication policy was in line with current guidance to support children's safety and wellbeing.

This area for improvement has been met.

Previous area for improvement 2

The manager should ensure that the personal information and personal plans for each of the children using the service are reviewed once every six months or more often as necessary.

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

'My care and support meets my needs and is right for me' (HSCS 1.19); and

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

This area for improvement was made on 18 March 2019.

Action taken since then

Personal plans were now reviewed every six months with families.

This area for improvement has been met.

Previous area for improvement 3

The manager should continue to support staff in recording reflective observations of children's development and learning. Next steps should be identified that are individual to each child. Where appropriate children should be fully involved in contributing to their own learning plans.

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

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

This area for improvement was made on 18 March 2019.

Action taken since then

Staff had attended training in observation, assessment and planning. Observations were regularly audited by the manager. Next steps were regularly identified, however, the manager should ensure that next steps are consistently revisited to ensure children are fully progressing.

This area for improvement has been met.

Previous area for improvement 4

The manager should continue to support the staff team in reflectively evaluating the impact of their professional development and implementing this when working with the children. In particular they should develop their skills in observations of learning and interactions in play.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 18 March 2019.

Action taken since then

The staff team were now regularly evaluating the impact of their professional development and implementing this when working with the children. Staff had also developed their skills in observations of learning and interactions in play.

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	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?	4 - Good
4.3 Staff deployment	4 - Good

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