

Crossgates Out Of School Club Day Care of Children

Crossgates Primary School
Dunfermline Road
Crossgates
Cowdenbeath
KY4 8AR

Telephone: 01383 510 993

Type of inspection:
Unannounced

Completed on:
4 November 2024

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2006117457

About the service

Crossgates Out of School Club is situated within the dining hall of Crossgates Primary School which sits within the village of Crossgates. It is in close proximity to local amenities including shops, woodlands and parks. The service is registered to provide care for a maximum of 24 children of an age to attend primary school but not exceeding 14 years of age.

Children have access to the dining hall area where a kitchen space is also available for the preparation of snacks. Children's bathrooms and nappy change area and the large gym hall are accessible within the school space and an outdoor playground area is used.

About the inspection

This was an unannounced inspection which took place on 31 October and 4 November 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 seven children using the service
- spoke with four staff and management
- gathered feedback from three parents/carers
- observed practice and daily life
- reviewed relevant documents.

Key messages

- Children were confident, happy, settled and secure in the service and interacted well with each other.
- Staff were responsive to children's interests and requests, contributing to children's enjoyment.
- Whole team involvement in self-evaluation was supporting quality assurance processes and improving outcomes for children.
- The service had met the requirement and areas for improvement made at the previous inspection.

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?	5 - Very Good
How good is our setting?	5 - Very Good
How good is our leadership?	5 - Very 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?

5 - Very Good

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

Quality Indicator 1.1; Nurturing care and support

The warm interactions from all staff contributed to the welcoming and respectful ethos where children were nurtured and valued. This enhanced children's confidence and feelings of security and happiness. One child told us that they run and hide when a parent comes because "we don't want to go home because we're having too much fun". One parent told us "Children love to go, always enthusiastic about the things they have been doing. Love the staff".

Staff's calm, quiet and respectful communication provided children with models of positive and gentle behaviour. This enhanced children's ability to interact positively with each other, which was seen during their play and interactions. Staff shared examples about how older children were taking responsibility in supporting younger and new children to settle in and get to know routines. Children were also about to review the club charter where they were fully consulted on expectations around behaviour in the club, giving them ownership.

Children were encouraged to develop healthy eating habits through the provision of nutritious snacks. Children told us "We get apples, oranges, bananas and sometimes we get pancakes" and "The snacks are healthy." They were keen to show and explain the snack planner where they could make suggestions. Children were encouraged to have their say and, at one point, asked if they could protest against too many healthy snacks. They wrote to senior management and marched against this but were encouraged to understand the importance of healthy snacks which they accepted. Children were able to eat when they needed to, allowing them to meet their own needs. Table cloths and plants supported a more inviting eating space, contributing to a positive social interaction period for children.

Children's welfare was promoted effectively as the arrangements for safeguarding were effective. Staff recognised signs and symptoms that may indicate possible abuse, along with wider safeguarding issues such as online safety. This contributed to children's continued safety and wellbeing.

Quality Indicator 1.3; Play and learning

Children received responsive care as staff were quick to respond to their cues and addressed their needs appropriately. Children were confidently using the toy catalogue to make requests which were immediately addressed. Staff were skilled in their level of engagement with children, knowing when to provide support, challenge or information to extend children's play and build their knowledge. The effective questioning by staff contributed to children's knowledge and understanding.

Children were confident learners as they had appropriate breadth and challenge in their play. All children were actively engaged as planned experiences were responsive to children's needs and interests. Floor books involved children in identifying their learning through play and demonstrated a wide range of play experiences. Children confidently shared their planning sheets with us and told us how they used these along with their toy/resource catalogue. An overview of play types within planning ensured that any gaps were identified and addressed. This contributed to children's enjoyment and achievement.

Children were active as they enjoyed regular opportunities to be outdoors and enjoy physical play. This included some free flow access to the playground, visits to the park and the forest. The physical play opportunities available outdoors included some risky play which built their capacity to understand and manage their own safety. One child told us "we sometimes go to the forest and can climb trees". Another told us "we've had a fire pit and toasted marshmallows". More regular opportunities for children to experience and manage risk in their play could now be considered.

Children were able to make a contribution to the local community through supporting the weeding and planting of the community garden. This provided them with a sense of purpose and pride. The service also continued to develop the link with the local care home, which helped children to build respect and understanding between the generations. These experiences provided children with opportunities to interact with others, develop an understanding of society and make connections to the outside world, helping them construct their own identity.

How good is our setting?

5 - Very Good

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

Quality Indicator 2.2; Children experience high quality facilities.

Provision of resources was managed well and gave children control through the use of the toy catalogue. The thoughtful layout of play areas using a floor plan which was developed with children meant they were engaged, stimulated and purposeful during their play. The regular use of other spaces such as the playground and school gym hall, enabled increased opportunity to be physically active. Children made use of all spaces and played well together. The relocation and further development of the cosy corner was allowing children the opportunity to rest and relax, as they played with fidget toys and shared books and chatted together quietly. We asked the manager to consider how to provide other appropriate spaces for children to reduce the interruption in this area when children wanted to hide.

Children benefitted from a service and resources which were clean, with appropriate systems in place to reduce risk of cross infection. This contributed to children remaining healthy.

Risk assessments were held and an overview of health and safety was carried out monthly, ensuring children's risk of harm was reduced. To develop children's own understanding of safety, they could now be meaningfully involved in risk assessing play spaces and activities.

Information about children was kept securely. Sensitive information was only shared with those who needed it to meet children's needs. Staff understood the importance of confidentiality as part of safeguarding children. Paperwork was stored securely or managed well to reduce others viewing this whilst still remaining accessible, such as allergy information. As a result, children's information was protected, and storage complied with relevant best practice.

How good is our leadership?

5 - Very Good

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

Quality Indicator 3.1; Quality assurance and improvement are led well.

Children experienced positive outcomes because practice was consistently monitored. The manager had developed robust systems and a quality assurance calendar to ensure they reviewed all aspects of provision. This now included review of staff interactions which could be used to support supervision and appraisal meetings and identify any training needs. An overview of training and development was also maintained ensuring that staff practice remained up to date contributing to quality care and support for children.

The improvement plan had been developed with input from the whole staff team, enabling a shared approach to improvement. This now reflected areas for improvement as identified by the team rather than being in response to inspection and was more meaningful. A display board of the plan made the progress on targets visible as they added evidence to this. This meant children and families could see the improvement journey.

Children had regular opportunities to give their views through activity and snack planners, along with floor book discussions and their 'we asked/we got' board. These were taken into consideration and used to make changes such as the change to the floor plan for activity areas, enabling children to feel valued and empowered. Families' views were gathered through floor book questions along with questionnaires. The children were fully involved in gathering and reviewing the outcomes from these. They created bar graphs and wrote out selected comments which were then displayed on the 'you said, we did' board. This ensured families' views were respected, responded to and influenced change for improvement.

The service were not maintaining a log for any complaints made directly to them. We suggested putting this in place to record complaints raised and action taken to address these. This would feed into the quality assurance process by highlighting and addressing improvements needed and carried out.

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/people, therefore we evaluated this key question as very good.

Quality Indicator 4.3; Staff deployment.

Staff interactions were warm, calm and nurturing, they all knew children well and used their knowledge of children as individuals to support their wellbeing. Parents commented positively on the staff team and told us "I think the staff are great and they do an amazing job catering for different ages, interests and needs. My son always looks forward to coming and always has a positive experience".

The staff team was established with a good mix of skills and experience between them. They drew on their previous work experience to enhance outcomes for children such as supporting children's emotional wellbeing. They worked well together as a team along with the manager, and effectively communicated during the day to ensure children's needs were met.

Staff ratios were maintained appropriate to the needs of the children attending, ensuring children were appropriately supervised and fully included in all experiences. Parents told us "On the day my child is in there always seems to get a good amount of staff for the amount of children that are there". Consistency of supply staff and use of staff from other settings within the network meant they were familiar with the setting and to children. This enabled consistency of care for children.

During free flow play to the playground, staff positioned themselves and maintained communication with walkie talkies. They moved fluidly to assist and monitor children safely. Staff were aware of the 'SIMOA' (safety, inspect, monitor, observe, act) campaign in order to keep children safe. However, there remained scope to develop how they use this to raise children's awareness.

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

Requirements

Requirement 1

In order to ensure required information is shared with the Care Inspectorate, the provider must ensure they comply with notification reporting as detailed within the document 'Records that all registered care services (except childminding) must keep and guidance on notification reporting V2' by 26 September 2023. Reference can be made to the document on our website.

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

It is also necessary 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 requirement was made on 29 August 2023.

Action taken on previous requirement

Management have familiarised themselves with the guidance on notification reporting and submitted notification for a previous incident. There have been no further incidents for notification. This requirement is therefore 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

The provider should review all information held on children along with parents, and ensure this is dated. This should be carried out at least once every six months or sooner if there is any change in a child's health, welfare or safety. This is to support planning of care and support required.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that 'My personal plan (sometimes referred to as my 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).

This area for improvement was made on 29 August 2023.

Action taken since then

Personal plan review sheets seen to be updated every six months and management are quality assuring records to ensure consistency. This area for improvement is now met.

Previous area for improvement 2

The provider should improve planning of children's play experiences to ensure breadth, depth and challenge for children across a range of play types. This should meet the needs and interests of children present. Staff should be supported to develop their knowledge of play types and use this to support planned experiences.

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

This area for improvement was made on 29 August 2023.

Action taken since then

Overview of planning and evaluation was taking account of the play types and ensuring a breadth of play experiences were available. These were also evident within floor books and children's comments on their play. This area for improvement is now met.

Previous area for improvement 3

The provider should review all information held on children, along with parents, and ensure this is dated. This should be carried out at least once every six months or sooner if there is any change in a child's health, welfare or safety. A review of medication held should be completed at least once a term to ensure this is still appropriate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that 'My personal plan (sometimes referred to as my 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).

This area for improvement was made on 29 August 2023.

Action taken since then

Medication records were closely monitored and staff had set reminders to ensure that they asked parents to update medication records every 28 days. This area for improvement is now 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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very Good
How good is our setting?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very Good
How good is our leadership?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good
How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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