

# Blairhall Primary School Nursery Day Care of Children

Rintoul Avenue Blairhall Dunfermline KY12 9HG

Telephone: 01383 602 444

Type of inspection:

Unannounced

Completed on:

28 October 2024

Service provided by:

Fife Council

Service provider number:

SP2004005267

**Service no:** CS2003015905



## Inspection report

## About the service

Blairhall Primary School Nursery is situated in a residential area within the village of Blairhall, Fife. The service operates from a hut located within the grounds of Blairhall Primary School.

Children have access to an entry area, large playroom and a fully enclosed outside area. Children's toilets and a designated changing area are situated to the side of the playroom. A small kitchen area is used for the storage and preparation of snacks.

The service is provided by Fife Council and is registered to provide a day care of children service to a maximum of 36 children at one time, from age three years to an age to attend primary school.

## About the inspection

This was an unannounced inspection which took place on 21 October 2024, between 9:00 and 16:30 and 22 October 2024 between 10:00 and 15:00. Feedback was given at the end of the second inspection visit. Additional information gathering was carried out virtually on 28 October 2024. 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, 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 a number of children using the service
- spoke with and gathered feedback from four families
- spoke with management, staff, a visiting professional and the provider
- observed practice and children's experiences
- · reviewed documents.

## Key messages

- Children experienced nurturing care and respectful interactions.
- Children were supported to lead their play and learning.
- Play spaces enabled choice and free movement.
- The service were working well with the provider to improve the overall experiences for children and their families.
- Quality assurance was developing well. The service should now enhance and formalise the evaluation methods in place.

## 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 made an evaluation of good, for this key question. As several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on the children's experiences.

#### Quality Indicator 1.1: Nurturing care and support

Children experienced nurturing care throughout their day. Warm and respectful interactions supported them to feel safe and well cared for. Positive relationships and attachments with staff contributed to children feeling happy and secure.

Staff sensitively responded to children's individual cues when seeking reassurance and supported them well to explore and express their emotions. Specific tools such as, emotion spoons and soft colour monster toys encouraged children to think about their feelings. This and gentle discussions with staff promoted children's understanding of their emotions. Within the playroom a cosy area gave children a comfortable space where they could rest, relax and be on their own if they wanted to. This enabled children to set their own pace of day. Consideration should now be given to how children could access these experiences in the outside area.

Personal care was sensitively supported and promoted children's independence, privacy and dignity. Staff were respectful of children's individual needs and wishes throughout these experiences. Children could be better supported to develop self care skills. For example, washing their faces after mealtimes and wiping their noses when needed. This would promote children's pride in themselves and learning of new life skills.

Staff knew the children well and gathered important information to help them provide the right level of care and support. Positive working with families and other professionals contributed to the development of specific strategies when additional support was needed. This meant most children received care tailored to meet their individual needs and supported them to remain happy and settled in the care setting. To ensure continuity of care for all children, management should support staff to ensure they are familiar with each child's specific support strategies.

Mealtimes were sociable and unhurried, giving children time to chat with their friends and enjoy their food. Nutritionally balanced menus and the safe management of allergies promoted children's continued health. Children's independence was encouraged as they self selected foods from serving trays, poured their own drinks and tidied up after eating. We asked the service to review the lunch time routine to promote consistency in children's mealtime experiences. For example, at snack time children were using real crockery; however, at lunch time plastic dishes were provided. Lunch was eaten in the school dining hall. We discussed ways in which the lunch time environment could be enhanced to offer children a homely and nurturing dining experience.

Medication procedures needed reviewed to reflect current guidance. This included, information gathering about medication to be administered, developing specific medical care plans and the safe administration of medication. Management and staff should familiarise themselves with the current guidance document 'Management of medication in day care of children and childminding services'. This will support them to ensure the continued safety and wellbeing of children in their care.

#### Quality Indicator 1.3: Play and learning

Children were happy and having fun. They freely explored a range of experiences which promoted choice, creativity, exploration and discovery. Children were curious and asked questions, staff skilfully responded through shared interactions contributing to children's continued interest and enquiry.

Responsive planning gave children a voice and encouraged their involvement in the provision of daily activities. This supported children's continued interests and was beginning to reflect the importance of self led play and learning. The service had identified that planning systems could be improved to secure better outcomes for children. Management were supporting staff to develop a skilled approach to planning to promote children's individual progress.

Children's individual learners' journals captured their daily experiences and some of their learning. A group of children enjoyed showing us their journals and confidently told us about the activities they had engaged in. Information about children's learning was regularly shared with their families. This enabled families to work with the service to promote children's continued learning. The service had identified that information detailed about children's learning could be enhanced. This included, recording better observations and identified next steps to support planning. We highlighted that staff should formally include how they plan to support children to progress with the identified next steps.

Communication, language and literacy skills were promoted through fun activities. For example, reading stories, singing, rhymes, repetition of words and phrases when chatting. Numeracy skills were promoted through games, natural counting opportunities and children's curiosity. In the block area children enjoyed measuring the height of their constructions with a measuring tape. Print was displayed throughout the playroom supporting children's recognition of signs, letters and numbers. We highlighted opportunities to promote learning of language, literacy and numeracy in the outside area, could be enhanced.

## How good is our setting? 4 - Good

We made an evaluation of good, for this key question. As several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on the children's experiences.

#### Quality Indicator 2.2: Children experience high quality facilities

Children experienced a warm, bright and welcoming environment. Furnishings were comfortable and appropriate to the children in attendance. Improvements to the layout of the playroom enabled children to freely explore a variety of activities and play spaces. This promoted choice, independence and empowered children to lead their own learning.

Children were safe as they enjoyed free flow access to the secure garden area. They had fun as they sang, played with sand and explored a large climbing frame. Provisions in the outside area could be enhanced to ensure quality play experiences throughout the setting. This will further provoke children's interests and ownership of their play and learning.

Children enjoyed balancing and climbing on structures they had built using crates. Risky play opportunities could be increased to promote challenge and encourage children's learning and understanding of keeping themselves safe whilst exploring boundaries and developing new skills.

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Opportunities for play and learning were enhanced through positive connections with the local community. Walks and outings to a nearby park and woodland area promoted increased opportunity for children to engage in physical play. This had a positive impact on their wellbeing and promoted learning of the natural world around them.

A variety of measures were in place to ensure the safety and wellbeing of children. For example, clear risk assessments supported staff to manage and mitigate risks in the service and when in the community. Staff remained vigilant and acted promptly to promote a safe and secure environment for children.

Children's health and wellbeing was supported as infection prevention and control measures were mostly managed well. Children were encouraged to wash their hands at appropriate times throughout the day. We reminded the service to also encourage handwashing after eating food. To further promote a healthy and pleasant environment we asked the service to ensure appropriate ventilation in the bathroom.

Children's personal information was stored securely. Appropriate systems were in place to manage electronic information and paper records. This was in line with the general data protection requirements and ensured children and families' safety and confidentiality.

## How good is our leadership?

4 - Good

We made an evaluation of good, for this key question. As several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on the children's experiences.

#### Quality Indicator 3.1: Quality assurance and improvement are led well

Through effective communication, management and staff had developed a shared understanding of what was important in the service. They were committed to improvement and enhancing play and learning opportunities for the children. Working with the provider had helped to make positive change within the learning environment. Recent improvements to play spaces had positively impacted on children's daily experiences.

The aims of the service were mostly embedded in practice and reflective of the children's experiences. These had been shared with families and enabled them to develop clear expectations about the care and support provided to their children. The core value of a safe and stimulating environment in which children feel happy and secure helped to create a fun setting where children were supported well to progress.

Positive communication with families promoted good information sharing about children's individual learning, specific needs and daily experiences. This also encouraged effective information sharing about what was happening in the service. Families were encouraged to express their views and comment on the level of care and support they and their children receive. Families told us they were involved in a meaningful way to help develop the service.

Evaluation and quality assurance systems were progressing well. The overall improvement plan detailed the expected impact of improvements and how staff and management will measure the success of the changes made. Some action had been taken on identified improvements and was beginning to have a positive impact on children's play and learning. We recognised management were in the early stages of implementing the quality assurance plans and encouraged them to add formal methods to support monitoring and tracking of the identified improvements. This should include, a planned approach to monitoring staff practice and specific leadership and responsibility roles.

## How good is our staff team?

4 - Good

We made an evaluation of good, for this key question. As several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on the children's experiences.

#### Quality Indicator 4.3: Staff deployment

Following a period of change, staff and management had worked well together to build positive relationships and develop as a team. As a result, staff felt supported, valued and respected by management. Staff were clear on their roles and were enjoying varied opportunities to develop leadership skills and take responsibility for certain aspects of the service.

Staff were mindful of children's differing personalities and demonstrated respect in their interactions such as, using gentle tones, positive facial expressions and offering consistent praise and encouragement. Parents told us staff, "Genuinely care for the children and know their individual needs". The relaxed pace of interactions built children's trust and contributed to their continued enjoyment.

Staff moved fluidly throughout the service in response to children's requests and chosen areas for play. They positioned themselves appropriately for maximum supervision, both indoors and outside. Effective communication as a team supported continuity of care when tasks took them away from their area of responsibility. For example, confidently asking for cover when needed. This contributed to staff being continually available to children and promoted continued safety. Staff breaks were planned well to promote continuity of care across the day and ensure positive transitions for children. This included busy times such as, lunch, children's arrival and collection at the end of the day. As a result, children continued to experience free flow play and a good level of care.

There was a good mix of staff skills and knowledge across the setting. New staff were inducted into the setting using the National Induction Resource, this enabled staff to reflect on their experience and expectations within the setting. Positive mentoring supported new staff to feel confident and comfortable in their new role.

## 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

To support children's learning and development, the provider should review personal planning. This should include but is not limited to, including views of parents and children.

This is to ensure that care, play and learning 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).

This area for improvement was made on 10 June 2022.

#### Action taken since then

Formal and regular meetings with families had been developed to share information about their child's needs and individual progress. During these meetings staff and families discuss next steps and strategies to support continuity of care and children's continued development. This enabled them to express their views and remain involved in their child's care and daily experiences. Children's voice was captured in their learning journals, floor books and discussions with staff. Their contributions were used well to develop individual care and development plans.

This area for improvement had been met.

#### Previous area for improvement 2

To support children's wellbeing, the provider should review mealtime routines. This should include but is not limited to, ensuring children have a nurturing experience with time for quality interactions from adults and opportunities to develop independence.

This is to ensure that care, play and learning is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible' (HSCS 1.35).

This area for improvement was made on 10 June 2022.

#### Action taken since then

Staff sat with children throughout mealtimes, chatting with them and promoting positive eating habits. The mealtime experience encouraged life skills and independence as children self selected foods, poured their own drinks and took responsibility for tidying their place setting once they had finished their meal.

We assessed this area for improvement as met with scope to continue improving the dining environment.

Further information about this can be found under 'Quality Indicator 2.2: Children experience high quality facilities'.

## Previous area for improvement 3

To support children's wellbeing, learning and development the provider should develop the outdoor play space. This should include but is not limited to, ensuring children are safe in their environment and have access to resources and equipment that encourage investigation, creativity and exploration.

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

'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32); and

'My environment is secure and safe' (HSCS 5.17).

This area for improvement was made on 10 June 2022.

#### Action taken since then

Some action had been taken to improve the outdoor play space. The provider was working with management and staff to further enhance the quality of play experiences within this area.

We assessed this area for improvement as met with scope to continue improving the outside environment and children's play and learning experiences.

Further information about this can be found under 'Quality Indicator 2.2: Children experience high quality facilities'.

## Previous area for improvement 4

To support children to have high quality experiences the provider should improve resources in the playroom. This should include but is not limited to, replacing some furniture and providing resources that encourage investigation, creativity and exploration.

This is to ensure that the setting is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.21).

This area for improvement was made on 10 June 2022.

#### Action taken since then

The manager and staff were working with the provider to enhance children's play and learning experiences. Throughout the inspection children were busy with most being engaged in their play. Play spaces had been developed to promote children's interest and resources set out to encourage creativity, enquiry and discovery. Furniture was in a good state of repair and appropriate to the children in attendance.

## 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	4 - 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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