

Bellyeoman Out of School Club Day Care of Children

Bellyeoman Primary School
Robertson Road
Dunfermline
KY12 0XP

Telephone: 07515 189 433

Type of inspection:
Unannounced

Completed on:
14 November 2024

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2003016423

About the service

Bellyeoman Out of School Club is a day care of children service situated within Bellyeoman Primary School. The service is registered to provide care for a maximum of 24 children during term time and 32 children during school holidays from an age to attend primary school to 14 years.

The service is close to local amenities, public transport links, parks and a wooded area. The children have access to a playroom with adjoining kitchen, the gym hall, toilet facilities and playground.

About the inspection

This was an unannounced inspection which took place on 12 November 2024 between 14:55 and 18:05 and 13 November 2024 between 14:55 and 17:00. Feedback was given on 14 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 children using the service
- received feedback from five families
- spoke with staff and management
- observed practice and children's experiences
- reviewed documents.

Key messages

- Children experienced friendly, kind and respectful interactions. They had built positive relationships with staff.
- Staff knew children well and provided effective support to meet their needs.
- Children actively led their own play and learning. Planning approaches were child centred and staff were responsive to children's suggestions and interests.
- Some quality assurance processes were having a positive impact on improving outcomes for children. These should be further developed to ensure they are robust.
- Staff worked together as a team and communicated well to ensure children were effectively supervised and supported.

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 and clearly outweighed areas for improvement.

Quality Indicator 1.1: Nurturing care and support

Children experienced a warm and welcoming atmosphere. Children talked positively about the club and told us that they enjoyed coming. One child said that they feel "nice and calm" at the club. Staff were friendly, kind and respectful and as a result, children were happy, confident and relaxed. Children told us that the staff were "good". Children and staff had fun together and had built positive relationships. Families highlighted that staff were a strength of the service. Their comments included: "The staff are friendly" and "(Staff) are fab. They are always really supportive".

Staff knew children well and provided effective support to meet their needs. Children had personal plans in place which detailed their needs, wishes and choices. These had not been reviewed in a timely manner to ensure information was current. We discussed updating the quality assurance calendar to support staff to review information with families regularly (see area for improvement one under key question three). Children's medical and dietary needs were understood and well managed by staff which helped to keep children safe.

Children were involved in planning snack and staff were responsive to their suggestions. They experienced a calm, relaxed and sociable snack as they sat with their friends, chatting, and eating together. They had some opportunities for independence, for example, pouring their own drinks and self-serving. Children's involvement in snack preparation could be increased to further promote responsibility.

Quality Indicator 1.3: Play and learning

Children actively led their own play and learning. They played independently and cooperatively with friends and enjoyed a range of activities which supported their learning and development. Children told us their favourite activities were art, Lego, and playing outside on the trim trail. They had the opportunity to be part of a community initiative, taking part in an art competition. The variety of activities provided opportunities for children to be creative, active and have fun.

Planning approaches were child centred, for example, children contributed to floorbooks to share their ideas. Staff were responsive to children's suggestions and interests and as a result, children had fun and were engaged in their play. Children's involvement could be enhanced by providing them with opportunities to identify skills they would like to develop at the club and to be more involved in evaluating play experiences.

Staff effectively facilitated children's play and learning. They recognised when to give children time and space to lead their play independently and provided support and interaction when invited by children. This supported good quality play and learning experiences.

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

Children experienced an environment which was clean and well ventilated. Consideration had been given to the space available to ensure children had ample space to play. Staff had developed an area for children to relax with blankets and cushions. There was scope for this to be further developed to create a more cosy, comfortable and homely space to support children's wellbeing.

Children made use of the gym hall and outdoor area which provided good opportunities for physical, active play. For example, children enjoyed playing team games together. Children spent time outdoors, and on darker nights, the addition of torches created a fun experience for children which also contributed to creating a safe environment.

Children had access to a selection of developmentally appropriate resources which were easily accessible. This supported children's choice and independence. As a result, children were engaged in play and having fun. Staff had identified that children would benefit from loose parts play, both indoors and out. They had begun to gather materials and resources to offer children a wider variety interesting and exciting play experiences.

Risk assessments were in place which helped staff to reflect on potential hazards and implement measures to reduce risks within the environment. We discussed how risk assessments could be further developed to reflect the individual setting. Staff supported children to take part in appropriate risky play, for example, climbing on the trim trail. This enabled them to challenge themselves and explore how to manage risks.

Infection prevention and control measures were generally good. For example, children washed their hands on arrival at the club which helped to keep them safe and healthy.

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 vision, values and aims reflected the service, with a focus on promoting a happy, caring environment where children had fun. Children had good opportunities to share their ideas and views about the club through daily discussions, questionnaires and floorbooks. For example, they suggested snack ideas and gave feedback on the activities and experiences. Staff were responsive to their suggestions. Some families told us that they did not feel meaningfully involved in developing the service. Families had opportunities to provide feedback, for example, through questionnaires. Staff had identified this was not always effective in gathering views and were exploring other ways to engage with families.

Children and families benefitted from a realistic improvement plan which focused on the key priorities of the service. It contained clear and achievable targets which supported staff to make improvements. Staff had a good understanding of where they were within their improvement journey and were motivated to continue to improve children's experiences and outcomes. There was scope to further reflect on practice through self evaluation processes to develop a continuous cycle of improvement.

Some quality assurance processes were having a positive impact on improving outcomes for children. However, some processes were not always fully effective, for example, personal plans had not been reviewed in a timely manner (**see area for improvement one**). We discussed how the quality assurance calendar could be further developed to support effective monitoring and auditing.

Areas for improvement

1. To support a culture of continuous improvement that addresses key areas for improvement, the provider should implement a robust and effective quality assurance system to monitor and improve experiences for children across the service.

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

How good is our staff team?

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 4.3: Staff deployment

Staff worked together as a team and communicated well to ensure children were effectively supervised and supported. Staff were responsive to children's play and moved flexibly throughout the play spaces to provide effective support, interaction, and engagement. As a result, children experienced good quality care, play and learning.

Staff were respectful and supportive of each other. This created a positive environment for children and families. Families shared mixed feedback on the communication they received from staff. Their comments included, "I know the staff by name and they are always friendly and informative about what my children have been doing at pick up" and "Contact is minimal and very little information is passed on". This meant that some families may not always feel well informed to support a smooth transition between the club and home.

The staff team were stable and consistent, which ensured families knew which staff were supporting their children. Effective arrangements were in place in the event of absence, with familiar staff from other clubs or the manager providing support. This meant that children and families experienced continuity and consistency of care.

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

Requirements

Requirement 1

By 31 October 2023, the provider must ensure that all children have personal plans in place and information required for children to support their individual care and needs. These must be reviewed at least once every six months with parents.

This is in order to comply with Regulation 5 (1) (2) (a),(b),(c),(d) (Personal plans) of the Social Care and Social Work Improvement Scotland (Requirements of Care Services) Regulations 2011 (SSI/2011/210).

This is in order 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).

This requirement was made on 6 September 2023.

Action taken on previous requirement

Personal plans were in place and included information which enabled staff to effectively support children. Whilst information had not been reviewed in a timely manner, staff were knowledgeable and confident about meeting children's individual needs.

The aspect regarding the review of personal plans has been reflected in the area for improvement under key question three.

This requirement has been met.

Met - within timescales

Requirement 2

By 1 October 2023, the provider must ensure children's safety and wellbeing is not compromised. To do this, the provider must ensure risk assessments appropriately identify hazards and mitigations are in place to minimise risk effectively.

This is in order 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 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).

This requirement was made on 6 September 2023.

Action taken on previous requirement

Risk assessments had been developed and identified potential hazards and measures to minimise risks. This supported children's safety and wellbeing.

This requirement has been 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

To ensure appropriate levels of challenge and high quality experiences for children, the provider should develop their approaches to child led planning. Consideration should be given to ensure all children's individual stage of development is well considered.

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).

This area for improvement was made on 6 September 2023.

Action taken since then

Approaches to planning had been improved which meant that children actively led their play. Play and learning experiences were relevant to children's stages of development, interests and wishes. As a result, children were engaged and had fun.

This area for improvement has been met.

Previous area for improvement 2

To support a culture of continuous improvement that addresses key areas for improvement, the provider should implement a robust and effective quality assurance system to monitor and improve experiences for children across the service.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 6 September 2023.

Action taken since then

Some progress had been made towards implementing quality assurance processes, for example, a clear, relevant and achievable improvement plan was in place. Monitoring and audits were not always robust and effective to support improved outcomes for children and families.

This area for improvement has not been met and remains in place.

Previous area for improvement 3

To ensure children have access to a range of experiences and are well supervised, the provider must ensure that the deployment of staff provides adequate supervision and quality engagement with children across the day.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This area for improvement was made on 6 September 2023.

Action taken since then

Children were well supported and supervised as staff were effectively deployed. This meant children experienced good quality care, play and learning.

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	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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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