

# Thrive Childcare and Education Corner House Nurseries Gillsland Day Care of Children

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Merchiston  
Edinburgh  
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**Type of inspection:**  
Unannounced

**Completed on:**  
22 November 2024

**Service provided by:**  
Thrive Childcare and Education  
Limited

**Service provider number:**  
SP2003002955

**Service no:**  
CS2015336532

## About the service

Thrive Childcare and Education Corner House Nurseries Gillsland, is registered to provide a care service to a maximum of 58 children aged three months, to those not yet attending primary school, with a maximum of 18 children under two years.

The service operates from a large detached villa in the Merchiston area of Edinburgh. The premises consist of three floors with children accommodated on all levels. There is a large outdoor space, which is separated into three garden areas for each age group of children.

The service is close to local transport links and other amenities.

## About the inspection

This was an unannounced inspection which took place on Tuesday 19 November from 09:20 until 18:15 and Thursday 21 November from 09:20 until 18:10. 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 19 children using the service and gathered feedback from 18 of their families
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents

## Key messages

- Children enjoyed interactions with staff, which were warm, supportive and respectful.
- Children's personal plans were developed with families helping staff to meet their needs and keep them safe. These could be further developed to ensure that reviews are effective and share how children will be supported to achieve.
- Children were having fun playing with their friends in playrooms which gave them opportunities to build confidence and learn new skills with age appropriate resources.
- Action should be taken to ensure that the environment is always warm and clean to keep children, safe comfortable and healthy.
- Quality assurance systems had been developed and were starting to improve children's experiences.
- The deployment of staff should be further developed to ensure that it positively impacts on children's experiences.

## 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?	3 - Adequate
How good is our leadership?	4 - Good
How good is our staff team?	3 - Adequate

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 interactions which were generally warm, supportive, kind, caring, respectful. Children were mostly settled, happy and engaged in the care of familiar adults. Personal care was supported sensitively. For example, staff invited children to have nappies and clothes changed. Where children showed a choice or preference, this was respected. Cuddles, comfort and nurturing care were provided by staff supporting children's sense of security and belonging. Staff responded to distress and offered comfort but this was not consistent across the day. For example, there were some missed opportunities to support children to engage in play when they were directionless at busy times of the day. The service could continue to develop how they support children's emotional wellbeing through interactions.

Mealtimes promoted independence and were sociable experiences where children ate well and at their own pace. Staff were aware of information about allergies and cultural needs, helping to keep children safe. Children enjoyed the healthy snacks provided. The service should continue to develop the main meals to ensure that these are always balanced, providing appropriate alternatives, and sharing accurate information with families about what has been eaten. This will help to keep children healthy. Staff supervised children well. Staff told us that they were confident about how to prevent and deal with choking incidents, helping to keep children safe.

Overall, children medical needs were safely managed. Staff knew which children had medication and records supported them to know what actions to take in the event of an emergency. The service should ensure that agency staff are informed of medical needs and allergies when they arrive so they can help monitor and keep children safe. The reviews of children's medical needs should be further developed to show when these have taken place and what changes have been made to ensure that these are accurate and clear across the child's plan to keep children safe. Consideration should be given to including individual risk assessments in the playrooms, to ensure that information is easily accessed by staff.

Personal plans were in place for all children. Key information was gathered in partnership with families and was used effectively to help staff provide individualised care. Most staff knew children well and could share how they supported their care needs. For example, sleep routines were followed and preferences in relation to food and play experiences were provided. The service should continue to develop how they plan strategies to support children to develop. Information about children's development should also be recorded to ensure children are fully supported to achieve. This would help staff to evaluate if support was effective at meeting individuals needs.

Overall, sleep experiences were safe, and children were well supervised. Children were soothed and comforted in line with their preferences. Areas or rooms were adjusted to make them calmer for children to sleep in. The service shared that they were developing a new sleep space for the toddler room to make this a more positive experience for children.

Staff understood their role and responsibilities in keeping children safe. Staff were familiar with organisational procedures and followed these helping to keep children and families safe.

### Quality indicator 1.3: Play and learning

Children were having fun and enjoying playing with their friends. Children accessed a variety of play opportunities which supported them to learn new skills and develop.

Children enjoyed a variety of creative play opportunities and enjoyed sharing their art works with us. We saw that their work was respectfully displayed in the rooms celebrating their achievements.

Children enjoyed opportunities to build their language and literacy skills supported by staff through storytelling and songs. At times, staff were called away from reading to complete tasks. The service should consider ways to support staff to finish these experiences, before completing tasks, to support children to feel respected.

There were a number of disruptions to children's play throughout the day. At times, this meant children waiting around for periods of time with no purpose. For example, older children were asked to stop playing to tidy up for lunch. Then a group of children were taken for lunch where they waited in line to serve their own lunches. The other group were then asked to play until it was their time for their lunch. This could be reviewed to maximise children's opportunities for sustained play and reduce time spent waiting for the next activity.

Staff supported children's play and learning through effective narration of daily experiences and play. They often scaffolded actions and play, which children responded to, helping them to learn and develop. Staff interactions and play experiences also developed children's skills in language, literacy, and numeracy. For example, by using mathematical language in the construction area. Some staff used inquiry style questions to support children's thinking, for example asking how a child was planning their tower building. Staff could further develop their questioning to support children's curiosity and problem solving.

Children enjoyed playing with a range of resources which were within playrooms. Core resources were available in all of the rooms and this supported children to make choices about play. Babies had a good range of resources and experiences that focused on their needs for exploratory, sensory play and opportunities for movement and schemas to develop. Some resources had been added to support children's current interests in the 3-5's room. This could be further developed to ensure that the play opportunities were purposeful and supporting children to develop skills identified through personal planning. Some areas could be developed to make them more inviting for the children to support curiosity and help them to build new skills.

Planning for activities and experiences were explored in the floor books and displayed for families, helping to involve them in their child's learning. These could be further developed to show how children are learning and to support them to revisit what they have learned. Staff used a mixture of intentional and responsive planning to develop experiences for the children. Further work was needed, to embed planning approaches, to ensure they met the needs of all children. For example, considering how to develop greater levels of challenge for children within the planned and responsive experiences.

Children's learning journals and the information shared with families in children's development overviews gave an update of children's interests, personalities and achievements. This helped staff to consider next steps for children's development. Observations were often narrative and many next steps were too generic. However, the leadership team was aware these should be further developed to ensure that these are meaningful. For example, identifying significant learning for individuals and sharing the strategies which will be used to support children to achieve.

## How good is our setting?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### 2.2 children experience high quality facilities

Overall, the setting was well furnished with developmentally appropriate furniture for the children in the rooms. This was age and stage appropriate and supported the children to be independent. Some areas were made comfortable with soft furnishings helping the service to feel homely. Consideration could be given to further developing cosy spaces for children to access to support self-regulation.

Play spaces reflected the needs and interests of the different age groups and rooms had a variety of play resources which were age and stage appropriate. As a result, most children were engaged in play, could make choices, and were having fun.

A welcoming entrance area was inviting for the children and their families and created a sense of inclusion and calm as you entered the building. The building is on a three levels and had gates on the stairs which were kept secured. This helped to keep children safe.

We were concerned about the heating levels in the playrooms and nappy changing areas during the inspection. We raised our concerns with the manager at the very start of the inspection. The manager took some actions to make the environment warmer, however this was slow to take effect and the rooms were again below appropriate temperatures on the second day of inspection. While we appreciate that heating issues occur, children should expect to be cared for in a warm environment. The service must ensure that heating levels are adequate for children at all times and take appropriate action as soon as any issues are identified. This was an issue at two previous inspections so should be effectively planned for and managed through maintenance. The area for improvement made at a previous inspection is continued in this report (see area for improvement 2 under 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Overall the nursery environment was clean, however, there were some gaps in infection, prevention and control measures which we shared with the service during the inspection. For example, damaged nappy changing mats which could no longer be cleaned effectively. The service should ensure that all appropriate infection control measures are in place to keep children safe. For example, ensuring that food is served from clean work surfaces and cleaning items, like mops and buckets, are stored out with children's reach. Handwashing could be improved to support children to stay healthy. For example following mealtimes and after nose wiping. (See area for improvement 1).

The garden spaces were enclosed helping to make them safe. We saw that actions to develop the garden spaces were underway. Maintenance and staff actions had improved the garden experiences for the pre-school aged children. Some items in toddlers and babies were tired and debris to the sides did not make it as inviting as it could be. During our inspection visits, some children did not access outdoors at all. Some children accessed garden very late in the afternoon when it was dark and very cold during the first visit. This limited children's opportunities to be active and enjoy physical play which they had been seeking throughout the day. The manager shared that lighting was being fitted soon to improve safety in these spaces. The work to develop the garden spaces should be continued to support all children to have positive play experiences in all areas. Parents commented "Children get to play in the garden, but not on a daily basis, at least not for the preschoolers group. There are also sporadic walks to the local parks, but these are even rarer occurrence" another said "My child absolutely loves the garden, playing with the water, learning about insects, playing make believe with her friends."

While appropriate nappy changing facilities were available for the number of babies present during the inspection, there were not adequate facilities for the number of children the service are registered for. A nappy changing facility which had previously been in place had been removed. The manager told us that there are building works planned to make another suitable facility available. The manager told us that the service would not take more babies than they had facilities for until the building works were completed. A notification of 'planned refurbishment or alteration or extension of the premises' should be submitted with regard to this planned work in line with legislative responsibilities.

### Areas for improvement

1.

The service should ensure that all appropriate infection control measures are in place to prevent the spread of infection and keep children safe in line with 'Health protection in children and young people settings, including education' (gov.uk 2024). This should include, but is not limited to:

- identifying infection control risks and taking action to address them
- encouraging good handwashing practice
- storing cleaning equipment out of reach of children
- providing meals with infection control practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment (HSCS 5.24).

### 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 leadership team had a clear vision for how to support the service to improve. They had floor books and displays which shared this with children, families and the staff team in the reception area. Some families commented that recent events to include them in the service had been positive for them. Staff told us they felt involved in developing the service through their own rooms and practice development. This had a positive impact on the children's experiences.

Some parents told us that they felt the new leadership had a positive impact on the service. Some told us about improvements they had seen, for example better garden spaces and rooms. Other families felt that more improvements were needed in the service. Some families did not feel as involved in developing the service, and some commented that the leadership team was not as accessible as they would like. The service should continue to work with families to support them to feel included and valued in the service.

Staff were often consulted with by the leadership team at staff meetings helping them to feel involved in developing the service. Staff meetings were also used to share updates to best practice guidance and provide training. This helped staff to improve their practice. Staff were keen to share their ideas and contribute towards improving the service. For example, staff in the baby room had been supported to

develop their approach to core experiences and this was having an impact on the quality children's play and learning.

The improvement plans identified key priorities for the service. Some of the key focus areas within the improvement plan were in line with our inspection findings, showing the service was taking action to address feedback. Some staff could talk about improvements plans, but to ensure a shared journey to improvement, further work was needed to ensure all staff were involved. For example, thinking about roles and tasks related to improvement could help the improvement plans to develop further and be embedded into practice.

The leadership team had developed their approaches to quality assurance to support them to develop service. The staff team and families we spoke with felt that this had supported improvement in the service. We saw that children's experiences were more positive in the service. The quality assurance processes were supporting this journey.

There were gaps in the current monitoring processes which we shared with the service. For example, heating levels, infection prevention and control and the accuracy of documentation in playrooms and children's personal planning which we have explored under other quality indicators. Accident audits had started to identify some patterns however, the data gathered didn't allow for things like location and time to be considered as part of the audit. These could be further developed to make the audits more effective. Monitoring and improvement planning could be further developed to ensure that improvements are clearly identified and that progress could be measured. Consideration could also be given to completing targeted monitoring of children's experiences. For example, reviewing how often children's play is disrupted unnecessarily and considering their experiences at the start and end of the day. An area for improvement made at a previous inspection is continued in this report, (see area for improvement 4 under 'What the service has done to meet any areas for improvement we made at or since the last inspection').

## How good is our staff team?

**3 - Adequate**

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

### Quality indicator 4.3: Staff deployment

Pictures of core staff were displayed in the foyer and this was helpful for families. However, information about which staff were in the room caring for children was not always completed. This meant that parents would not be fully informed about the current staff in the room. For example new, bank or agency staff or staff who were covering from other rooms were not displayed. Sharing this information supports families to feel informed about who is caring for their child.

On the first day of inspection the baby room had been closed due to staff absences. This meant that babies were not offered care when it was expected. It also meant that a number of staff were deployed in rooms where they were not as familiar with the children. This meant that the experiences on offer were more limited on the first day of inspection. Staff and parents told us that there had been other room closures due to staff absences. It is best practice to notify the Care Inspectorate about any significant change to service delivery for example, room closures.

On the second visit we saw that staff were focused on cleaning and tidying at the end of the day. This meant that children were not supported to play or have nurturing experiences at this time. For some children, they will need higher levels of support at this time of the day, when they may be tired. All children



have the right to experience positive engagement and play for as long as they are present in the service. Staff should deploy themselves well and plan tasks in the best interests of children at all times.

A number of parents expressed concern about staffing and deployment, this included about the number of staff physically present and available, as well as the staffing arrangements to allow for quality experiences. For example, one parent commented: "Recently (I) have noticed very little staff in the afternoon/around pick-up time". Further work is needed to ensure staffing arrangements and deployment provide parents with confidence and children with consistently positive experiences.

There were bank and agency staff in the service during the inspection. Some room leaders were comfortable directing staff, others needed to build their confidence and skills to support them to do this effectively and ensure more positive experiences for the children. To satisfy themselves that the agency staff supplied are safely recruited and appropriately skilled, for the roles they have requested them to cover, the service should further develop the information gathered. This will support them to ensure children's safety.

For all children where garden access did happen this was a whole group activity limiting children's ability to lead their own learning. Staffing arrangements across the day should now be reviewed to ensure that children are able to lead their own learning and decide where they want to play including in the outdoors or quiet room throughout their day. This would support children to have physical play opportunities and access to fresh air which would help their wellbeing.

An area for improvement in relation to staff deployment and children's experiences, made at a previous inspection, has not been fully addressed is continued in this report (see area for improvement 5 under 'What the service has done to meet any areas for improvement we made at or since the last inspection').

## 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

Children should experience approaches to meet their care and learning needs. To achieve this, staff should increase their understanding of approaches and develop their skills in supporting children's learning. 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 meets my needs and is right for me' (HSCS 1.19).

**This area for improvement was made on 7 December 2023.**

#### Action taken since then

Staff had accessed a variety of training opportunities to support them to develop children's play experiences. There were a variety of play opportunities available for the children during the inspection. We saw some positive interactions supporting children's learning. The service should continue to develop all staff's understanding to ensure that this is consistent across the service. Consideration should be given to reducing unnecessary interruptions to children's play for example. The service should continue to develop this.

**This area for improvement is met.**

## Previous area for improvement 2

To ensure children experience a consistently positive and respectful environment, the provider should ensure ongoing maintenance needs are identified and actioned through effective quality assurance. This would include but not be limited to ensuring children are cared for in a comfortable and warm environment. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22) 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 7 December 2023.**

### Action taken since then

On the first day of inspection the environment was too cold in some playrooms and nappy changing rooms. Two days later, on the second day of inspection some rooms were still cold. The morning checks had not been effective in identifying this. The manager had taken action to remedy the situation however, this was not yet effective. Monitoring had also not identified some infection and prevention control issues.

**This area for improvement is not met and is continued under quality indicator 2.2.**

## Previous area for improvement 3

To improve all children's play experiences, the management and staff team should continue to develop the indoor and outdoor environments, to ensure they are consistently comfortable and interesting, and motivate children to play and learn.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: 'As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling (HSCS, 1.30) and '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 7 December 2023.**

### Action taken since then

Some children did not access to the outdoors during the inspection. Some that did get access were playing in the dark when there were limited opportunities for quality play. On the second day the pre-school garden had been worked on and there was new bark making it a more pleasant environment for children. The service should continue to work on this to ensure that it provides children with a rich variety of experiences. The pre-school playroom was a pleasant and inviting space with some areas of interest. We spoke about how setting up provocations in areas would support children to access these and learn new skills. Consideration should be given to allowing children to access play in all areas throughout the day. The toddler's and baby garden still need work to make these consistently interesting and positive play spaces, however, we acknowledge the progress made and detail the impact under quality indicator 1.3.

**This area for improvement is met.**

## Previous area for improvement 4

To improve upon outcomes for children, quality assurance systems should be developed further to assess and improve the quality of the provision in line with best practice. The team should take responsibility for positively contributing to improvement and be accountable for the quality of their work. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that '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 17 November 2022.**

#### Action taken since then

The leadership team had developed their approach to quality assurance to support them to develop service. The staff team and families we spoke with felt that this had supported improvement in the service. We saw that children's experiences were more positive in the service. The quality assurance processes were starting to have an impact. We spoke about ways to further develop this. For example, by ensuring that improvements are clearly identified so that progress can be measured. Some of the monitoring processes were not yet effective in identifying risks and issues which should be addressed. The leadership team should continue to develop this in the service to support them to provide consistently high quality care.

**This area for improvement is not met and is continued in this report under quality indicator 3.1.**

#### Previous area for improvement 5

To promote consistently positive experiences for all children, the provider should support the management team effectively review the deployment of staff responsively across the day and when forward planning. Staffing arrangements should be well-planned to ensure there is the correct mix of skills, knowledge and experience available within each playroom. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: '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) and 'If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity' (HSCS, 4.17).

**This area for improvement was made on 17 November 2022.**

#### Action taken since then

On the first day of inspection the baby room had been closed due to staff absences. This meant that a number of staff were deployed in rooms where they were not as familiar with the children. This also meant that the experiences on offer were more limited for children.

There were bank and agency staff in the service during the inspection. We saw that some room leads were comfortable directing staff, others needed confidence built to support them to do this effectively and ensure more positive experiences for the children.

For all children where garden access did happen this was a whole group activity limiting children's ability to lead their own learning. Staffing arrangements across the day should now be reviewed to ensure that children are able to lead their own learning and decide where they want to play including in the outdoors throughout their day.

Parents raised their concerns about staffing levels at the start and end of the day and we noted that staff were focused on tidying up at the end of the second day, reducing the opportunities and attention children could have.

**This area for improvement is not met and is continued in this report under quality indicator 4.3.**

#### Previous area for improvement 6

The provider should support the service to further develop staff skills, knowledge and practice through effective training, learning and mentoring opportunities. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: '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 17 November 2022.**

## Action taken since then

The staff we spoke with told us they felt supported by the leadership team and their colleagues to develop their skills and knowledge of best practice. Team meetings had built knowledge, and staff had accessed core training online to develop knowledge. Staff were being supported to complete childcare qualifications and extend their childcare qualifications if in leadership roles. New staff had inductions and were being mentored to ensure they were equipped with the skills and knowledge for their role.

**This area for improvement is met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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