

Little Flyers After School Club @ Winchburgh Day Care of Children

Craigton Place
Winchburgh
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Telephone: 01506 854 066

Type of inspection:
Unannounced

Completed on:
12 December 2024

Service provided by:
We Care for Children Limited

Service provider number:
SP2010011353

Service no:
CS2014326471

About the service

Little Flyers After School Club @ Winchburgh is registered to provide a care service to a maximum of 30 primary school age children at any one time. The manager is also the manager of Little Flyers @ Ratho.

The service is delivered from a community centre in Winchburgh, West Lothian. All facilities are on one level. The centre is surrounded by green space and play areas which are used by the service. Children have exclusive use of the small hall and dining room and small outdoor space and access to the large hall and toilets during operational hours. Local use of the community centre is subject to change and so access to the large hall is not guaranteed.

The service is close to amenities such as nearby shops and parks.

About the inspection

This was an unannounced which took place on Tuesday 10 and Wednesday 11 December 2024 between the hours of 14:30 and 17:45 and 13:00 and 15:30 respectfully. We gave feedback virtually to the service on Thursday 12 December between 11:30 and 12:30.

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 seven children using the service and four of their parents/carers. We also received one response to the electronic questionnaires sent out to families.
- spoke with four staff and management
- observed practice and how children were supported by staff
- reviewed documents.

Key messages

- A new staff team was in place and had started to develop their working relationships.
- Staff interacted with children in kind, caring and respectful ways.
- Children were able to lead their play and choose from activities set up for their arrival from school.
- The manager should continue to develop quality assurance and self assessment to improve the service.
- The staff team should continue to share their skills, knowledge, experience and ideas to promote positive outcomes for children and families.

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?	3 - Adequate
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 a warm welcome from staff when they were collected at school. Staff understood the importance of promoting and developing positive relationships. We could see that respectful interactions and caring approaches by staff met the needs of children and supported their overall wellbeing. As a result, children knew they mattered as they were relaxed and happy in the care of staff.

Communication with families meant partnership working with parents had been established. This enabled information to be shared about the needs of children. One parent shared "Regular reviews of their plans take place." As a result, staff talked knowledgeably about children's individual needs and how they supported them. While we were confident children's needs were met, not all necessary information was recorded. For example, techniques or strategies used to support children or signs and symptoms of any allergies they had. The service was in the process of updating personal plans and staff should consider how plans are personalised with parents/carers and children's input. Regular sharing of information will help ensure that the strategies are effective at supporting children. We made an area for improvement at the last inspection about this. As it was not fully met we will update and restate it in line with our findings. **(see area for improvement 1).**

Children developed important life skills as they helped set up the snack area and prepare the food. Although staff were close by to supervise, children were independent to carry out tasks. They ensured other children knew when snack was ready and when spaces were available. This helped to promote children's confidence and self-esteem. Plans were in place to develop the snack time experience for children. A snack menu was going to be developed and displayed. This would inform children and parents what was for snack each day.

The system in place for the safe storage and administration of medication mostly followed best practice. We advised the service to familiarise themselves with, and review their procedures in line with the updated guidance, Management of medication in daycare of children and childminding services (Care Inspectorate, 2024).

Quality Indicator: 1.3 Play and learning

Children benefited from a well organised environment where activities supported their interests. As they were readily available to them, children settled quickly when they arrived from school. They led their play as they had choice about what they wanted to do. We saw they used their imagination, were creative with craft activities and played physical games. Staff supported children as they praised and encouraged them and recognised their achievements. Children shared there is a "full Barbie house with three floors, and we love it."

While children said 'there is lots to do', they would like more resources. For example, getting broken items replaced. A few children would like to bake, but the facilities did not support this. We suggested using portable appliances to overcome the issues. Staff were in the process of sorting out resources and identifying gaps in provision. They should use this opportunity to add open ended, natural resources and

activities that challenge children. These will motivate children's play and help to extend their creativity and imagination. Parents shared they would like, "Better activities for my oldest and give them more responsibility to help."

Planning sheets and a floor book were used to capture activities children had been involved in and record their input. There was scope to update the system so it was more user friendly. For example, develop the mind maps in place and visual plans for everyone to refer to. This would improve opportunities to involve children more in the planning process. For example, capturing their ideas through consultation and recording their feedback. Along with staff views, future play experiences can be planned to enhance and extend play and learning for children.

Areas for improvement

1. For children's health, welfare and safety needs to be fully met, the provider should ensure that personal plans contain relevant information about children's individual needs. This should include, but not limited to;

- health and dietary needs, including signs and symptoms should a child have an allergic reaction
- strategies and techniques used to support children
- ensure registration information is reviewed and updated in consultation with children and families at least every six months.

This is 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).

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

A warm, welcoming and well organised environment had been created for children. They had access to spacious areas within the community centre that included a main hall, gym hall and dining area. Children had opportunities to play physical games, be creative and use their imagination. As they could move freely between the areas, children led their play. There was an adjacent green space outdoors. Although offered, children chose not to use this area.

Staff were safety conscious and we saw that an established routine was in place for collecting children from school. Children were familiar with the rules and expectations when walking to the service. As the risk was minimised, this resulted in them walking safely in the community.

The spread of infection was minimised as the environment was well ventilated and maintained. Children were encouraged to wash their hands at appropriate times. The use of risk assessments and checklists meant children benefited from a safe environment. These were used to ensure any risk was identified and reduced. Children were supported to be aware of and staff supported them to think about safety in their play.

The service worked with the community centre committee to manage any maintenance issues.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where there are important strengths, but these are only just outweighed by weaknesses that need to be addressed.

Quality Indicator: 3.1 Quality assurance and improvement are well led

The manager and staff team were new to the service. This had impacted on the ability to make changes and improvements within the setting. The staff team had started to develop professional relationships and were enthusiastic and motivated to make improvements. This approach would help develop the service and promote positive outcomes for families.

They were at the early stages of developing quality assurance and self-evaluation to assess the work of the service. We concluded that a range of formal and informal systems were used to gather views from staff, children and parents. As a result, areas for improvement had been identified. To support this, an improvement would be compiled which would help to make and monitor change. Staff should be supported to use best practice guidance as this will support progress and positive outcomes to be achieved. **(See area for improvement 1).**

Children told us they were asked their views about the service. Some of their suggestions, such as baking, had not been used due to the lack of facilities. We gave suggestions to the manager about ways that could support this to give children a wider range of activities. One parent would like "More involvement with my eldest child on what she wants to do." Further consultation with children could be explored and used to help develop and extend activities. Children would feel valued as their ideas influenced change within the setting.

Observation of staff practice and audits had started to be used well to monitor the work of the service. Where areas for development had been identified, realistic timescales had been added for completion. Moving forward, the manager should continue to develop the system which will help identify progress made. It will support staff development and confidence as their achievements will be recognised.

Areas for improvement

1. To improve outcomes for children and families, the manager and staff should continue to develop quality assurance and self-assessment systems. They should be used to;

- identify gaps in practice and compile an improvement plan
- support the development of staff practice and
- offer opportunities for children and parents to share their views.

This is to ensure that I have confidence in the organisation providing my care and support and 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)

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where there are important strengths, but these are only just outweighed by weaknesses that need to be addressed.

Quality indicator 4.3: Staff deployment

Recent staff changes meant that the team had only worked together for a short time. Staff felt they were beginning to work well together as they had a mix of skills and experience. They should continue to explore their strengths and areas for professional development. This will enable them to share their skills, use their knowledge and build on their experience. All of which would benefit the service. Parents shared "I know some staff well but new staff need to be better at introducing themselves in person."

Staff were developing their roles and responsibilities which supported the routine of the service. They communicated with each other which meant children's changing interests and needs were supported. The use of walkie talkies enabled staff to support children's choice as they let each other know when children moved between rooms.

Staff confirmed they an induction booklet, but had not attended the organisations induction sessions. We were informed, to meet the needs of staff employed in the school age services, the induction is currently being adapted. To ensure new staff are supported in their role, there should be a clear process for mentoring them. Staff will develop an understanding about their role and responsibilities if learning expectations are outlined. This will help them develop the skills and knowledge they need to provide quality care and support to children.

Regular meetings between staff and managers had been introduced to help staff reflect on their work. These opportunities helped staff to identify what was working well and areas for development. To help newer staff gain confidence in their role, management should support them to work together and develop as a team. This will promote staff moral and motivation and lead to quality experiences for children. **(See area for improvement 1).**

Areas for improvement

1. To improve staff skills and knowledge so they can meet children's needs and develop the service, the provider should ensure;

- they are supported to complete an induction that suits their needs
- undertake training and learning suitable to their role. This should include child protection
- be made aware of best practice guidance that can support their work with children.

This is to ensure that I have confidence in the people who support and care for me and 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, and are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14).

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

For children's health, welfare and safety needs to be fully met, the provider should ensure that registration information is reviewed and updated as part of the personal plan review. This should include consultation with children and families should changes to information occur, or at least every six months.

This is 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 area for improvement was made on 29 June 2023.

Action taken since then

The service had started to update information about children, but there were still gaps in some children's documents. To ensure that children's individual needs can be fully met, the service should continue to gather relevant information to support their health, safety and well-being. In addition they should develop strategies and techniques needed to help children have positive experiences. All plans and registration information should be reviewed at least every six months.

This area for improvement has not been met so we will update it to reflect our findings at this inspection.

Previous area for improvement 2

For children to experience a safe and appropriately challenging environment, the provider should ensure that staff are given the correct training and guidance to maintain a safe environment. This should include, but not be limited to, risk assessments and checks being regularly carried out and identified hazards reported and addressed promptly. This should include indoors, outdoors and in the wider community.

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 5.22).

This area for improvement was made on 29 June 2023.

Action taken since then

Risk assessments and check lists were used to promote a safe environment. Staff used them each day to ensure any risk was addressed before children arrived.

An established routine to collect children from school and walk back to the service was well established. As children were familiar with the routines, they walked sensibly in the community.

This area for improvement has been met.

Previous area for improvement 3

To keep children safe, the provider should ensure that staff understand their roles and responsibilities. This should be at times when the manager is not present and when there are only two staff present.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support because people have the necessary information and resources.' (HSCS 4.27).

This area for improvement was made on 29 June 2023.

Action taken since then

A senior playworker role had been created in the service. When the peripatetic manager was not in the service, they were responsible for the operation of the service and supporting staff. The staff team were new to the service, but understood their role and responsibilities to ensure children were safe and had positive experiences.

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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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