

Limekilns Out of School Club Day Care of Children

Limekilns Primary School Dunfermline Road Limekilns Dunfermline KY11 3JS

Telephone: 07515 189 463

Type of inspection:

Unannounced

Completed on:

9 December 2024

Service provided by:

Fife Council

Service provider number:

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Service no: CS2004064095



Inspection report

About the service

Limekilns Out of School Club is in Limekilns, Dunfermline, Fife. They are registered to provide school aged childcare to a maximum of 24 children from an age to attend primary school to 14 years. They operate from the dining hall of Limekilns Primary School. Children have access to the dining hall, gym hall, toilets, and outdoor area. The service is close to green spaces, the beach, park, other local amenities and can be reached by transport links.

About the inspection

This was an unannounced inspection which took place on Monday 9 December 2024 from 07:45 to 09:00 and 14:45 and 18:00. Feedback was shared following the inspection. 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 and four families we received feedback via an electronic link from one family
- · spoke with staff and management
- · observed practice and daily life
- · reviewed documents.

Key messages

- · Children experienced caring interactions from staff.
- Children enjoyed preparing snacks from a range of healthy food choices.
- Planning approaches were child led and responsive to their needs and wishes.
- Staff worked well together and valued each other's skills.
- Personal plans were reviewed regularly with children and families.
- Quality assurance processes were beginning to support a consistent approach to service delivery.
- Children and families' views were gathered to support the service improvement journey.
- The service should ensure the review of their medication procedures reflect their policy.

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 were happy, settled and having fun. Interactions between staff and children were caring and nurturing. Positive relationships had been formed that supported emotional wellbeing. Children told us staff were good at keeping them safe and helping them. Nearly all families commented on how their child enjoyed their time in the club and taking part in the activities on offer.

Mealtimes offered children opportunities to develop independence skills as they helped prepare snack choices. They were consulted on food preferences and involved in menu planning. Children chose to eat with friends, enjoying a relaxed and unhurried experience that was fun and sociable.

Space to rest and relax was limited due to the size of the hall. Staff provided cushions and blankets that children used to create small areas. We suggested they look at resources that would offer some privacy so children could enjoy reading books and spend time talking with friends, limiting the noise level.

Personal plans were in place and children were able to access their plans independently. They added their creations to the folder, spoke with staff about what was important to them and what they would like to do next in the club. Staff used this information to support planning for experiences. Registration information was reviewed with families in line with guidance. This meant children's wellbeing was supported as staff had a good understanding of what mattered to each child.

The service had a system in place for the management of medication. We found that the reviewing of medication was inconsistent. The service should ensure medication is reviewed in line with their policy to meet children's health care needs (see area for improvement 1.)

Quality indicator 1.3: Play and learning

Children led their play for the session with no disruption. They were able to independently select resources from organised storage. Children chose from a selection of books, board games, craft materials, small world resources and role play. Many children enjoyed creating pictures and playing games with friends. This created a fun atmosphere with lots of laughter. Children told us they enjoyed the activities on offer and described the club as "amazing, and awesome."

Planning for play and learning was a balance of responsive and intentional promotion as staff responded to children's interests and ideas. They understood the importance of children having choice each session whilst offering planned activities alongside freely chosen play. Staff used children's ideas that they recorded in the floor book and from their individual all about me books to create a long-term plans. This meant children experienced a range of activities.

Children's learning was documented in the floor book. They wrote about their experiences, shared their creations and drew pictures to show their ideas. The floor book represented the fun they had. The information in this was written by children and gave a sense that they mattered.

Children were able to occasionally access green spaces close to the club to extend learning and support their development. We suggested they look at how they could access other areas in the community to enhance outdoor learning. For example, the local beach. This would offer more opportunities to connect with nature and the wider community.

Areas for improvement

1. To ensure children's healthcare needs are effectively met, the service should follow their policy for the safe management of medication.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

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

The service operated from a small dining hall in the local school. The room was warm, clean and maintained. Staff carried out daily checks of spaces to ensure any potential risks were identified and actions taken to remove these. This meant spaces were safe for children to play and explore.

Children had access to the outdoor area, trim trail, toilet facilities and occasionally the school gym hall. Spaces were ample for the small number of children attending the club.

Resources and equipment were well maintained and accessible to children offering them a variety of materials to support play and learning. The club had been developing their loose parts play, using the tool kit guidance for ideas on how to extend learning. This offered children some opportunities to create, investigate and problem solve using small parts. We suggested they could look at developing large loose part play if space was available for storage. This would offer more breadth and challenge.

Infection, prevention and control measures were in place. Staff cleaned areas before children played and enjoyed food. Hand hygiene routines were promoted as staff encouraged children to wash their hands at key times. This minimised the risk of infection and cross contamination.

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 improvements and led well

The service had a vision for what they wanted children and families to experience. Staff told us they promoted a fun, safe and caring environment and this was reflected in their interactions with children.

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This meant children enjoyed their time in the service and benefitted from the activities on offer that met their needs and wishes.

Children's ideas and suggestions on the club were gathered and recorded in the floor book and staff used this to support planning. Gathering the views of families was done informally through chats at pick up times. Staff recorded any suggestions on their improvement plan. Some families told us they were asked for suggestions on developing the service. We recognised they had made improvements in consulting stakeholders. We gave them ideas on how this could be further developed.

Staff had responded to improvements we suggested during the last inspection. They created a development plan with actions, responsibilities and outcomes for children. They evaluated this to measure the progress and agreed next steps. As a result, children benefitted from improvements that put their care, play and learning at the heart of ongoing developments.

The team was visited by their manager regularly to support the service. Staff told us they were responsive to requests and suggestions to enhance experiences for children. For example, purchasing new resources. There was evidence that some quality assurance and self-evaluation tasks had been carried out by the manager. This included monitoring, health and safety, medication and accidents. As a result, it was beginning to support the service to reflect on what they were doing well and identify next steps.

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

Children and families benefitted from a small team that worked well together and enjoyed their work. They valued each other's skills and experience, and this created a welcoming and warm ethos.

Staff ensured children were supported to lead their interests as they deployed themselves effectively across spaces. This promoted positive play experiences for children indoors and outdoors.

Families were welcomed into the setting and staff took time to talk about how children had spent their time and what was important to them. Staff knew families well and many had used the service for several years. As a result, positive relationships had been made that supported transitions. Nearly all families told us communication was good and that they always received information about the service and felt staff were responsive to their requests.

Children had worked closely with staff to create a club newsletter. This shared what was happening in the service, events and play opportunities they would like to develop. This supported communication with families and gave children some ownership of their club.

Staff communicated well as a team. They had systems in place to ensure communication was consistent across shift patterns. Staff also took part in meetings with colleagues from the wider area. This provided opportunities to access training, share ideas and reflect together to support consistency in school aged childcare.

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 promote children's continued learning, development, and enjoyment, the service should ensure information gathered and recorded in children's personal plans is reviewed regularly in line with guidance. This should include, identifying and recording children's current development needs, how the service will support their next steps and what is important to them.

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 9 January 2024.

Action taken since then

Personal plans were in place that included registration information, what was important to children and their next steps. The service had a system in place to ensure plans were reviewed in line with guidance. Progress had been made and we were confident this area for improvement had been met.

Previous area for improvement 2

To improve experiences and outcomes for children, the service should develop ways to regularly consult all stakeholders to influence change. Information received should be recorded and inform their improvement journey.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states that: 'I am supported to give regular feedback on how I experience my care and support, and the organisation uses learning from this to improve' (HSCS 4.8).

This area for improvement was made on 9 January 2024.

Action taken since then

The service consulted children regularly on their views and ideas on what they would like in their club. Suggestions were evidenced in the floor book and staff used this information to plan activities. Families ideas were gathered through informal discussions and recorded on the service improvement plan. We recognised improvements had been made and this area for improvement had been met.

Previous area for improvement 3

The service should engage in regular self-evaluation and monitoring as part of their quality assurance system. This will identify what is working well and highlight areas for improvement.

This is to ensure confidence in the people who support and care for me and is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance processes' (HSCS 4.19).

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This area for improvement was made on 9 January 2024.

Action taken since then

Monitoring visits and self evaluation had been carried out by the manager. Records evidenced what the service was doing well and next steps were identified to support continued improvement. We recognised improvements had been made and this area for improvement had 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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