

Auchtermuchty Primary School Nursery Centre Day Care of Children

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Telephone: 01334 659 448

Type of inspection:

Unannounced

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14 January 2025

Service provided by:

Fife Council

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Inspection report

About the service

Auchtermuchty Primary School Nursery Centre is situated in the residential village of Auchtermuchty in the East Neuk of Fife. It is within a very short walking distance to local amenities including local shops, woodlands, parks and library. The service provides early education and childcare for a maximum of 51 children aged 2 years to an age to attend primary school, of whom no more than 15 are age 2 - 3 years.

Children have access to two playrooms, bathrooms, nappy change areas, cloakroom corridor and entrance area. The nursery can also make use of other areas of the school such as the gym hall. A large nursery garden is accessible directly from the 3 - 5 playroom for both age groups, also within the school grounds there is a forest area which is used on a weekly basis. The outdoor space has been taken into account when agreeing the maximum number of children. Children must have access to the outdoor space at all times.

About the inspection

This was an unannounced inspection which took place on 13 January 2025 between 09:30 and 16:30 hours and 14 January 2025 between 09:00 and 17:15 hours. Two inspectors carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with approximately 10 children using the service
- spoke with/gathered feedback from 12 parents/carers
- spoke with management and staff members
- observed practice
- reviewed relevant documents.

Key messages

- Children are confident, settled and secure in the service and enjoy positive, nurturing relationships with staff.
- Quality assurance approaches are having a positive impact on children's outcomes and should be continued to ensure continuity across the whole nursery.

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?	5 - Very Good
How good is our staff team?	5 - Very 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/people and clearly outweighed areas for improvement.

Quality Indicator 1.1; Nurturing care and support

Positive relationships between staff, children and families were established through personalised discussions about each child, promoting confidence in the staff's care. Children received cuddles and comfort when hurt or upset, helping them feel secure to engage in other activities. Staff spoken with, identified that nurturing care was a service strength.

Emotions stations in the nursery enabled children to explore, and learn about and manage their feelings. These supported them to develop resilience for handling intense emotions. We asked the service to consider re-introducing their emotional check-in at self-registration. This would enhance children's understanding of emotions and their impact and enable staff to quickly offer appropriate levels of support.

Children were confident in the setting and happily interacted with visitors, demonstrating their sense of security. This confidence within the setting enhanced their social skills as they interacted more freely with peers and adults and increased their independence in exploring their environment and new experiences.

Individual sleep routines were well managed. Easily accessible cosy spaces where children could rest and relax promoted choice and ownership of their pace of day. We asked the service to develop clear records of children's sleep to monitor and support their rest needs. We also asked them to reconsider the location of the cornicle in the younger room to improve sleep conditions in a quieter area. The service should refer to the 'Safer Sleeping' quidance available on our website.

Children were empowered in their self-care, promoting independence and confidence. Personal care was managed with sensitivity and respect, ensuring children's dignity was maintained. For example, children were discretely shown nappies as an indicator for changes and were supported in dressing and undressing for outdoor play.

Children had opportunities to be fully involved in snack preparation and were independent in self-serving and clearing away. Water was always available ensuring they remained hydrated. Menus were healthy and following new 'setting the table' guidance. This meant children were developing positive eating habits which contributed to them to maintaining healthy relationships with food. As afternoon snack was not actively served, we asked the service to consider making the fruit option more accessible and to ensure that children's bottles are checked to support promotion of water or milk as healthy options.

Children's personal plans were in place and kept under review. Other relevant information was gathered on 'all about me' sheets, which was well recorded. Specific needs were supported using 'individual child focus sheets'. These included addressed current support needs, ensuring a shared understanding and approach from all staff. While the child focus sheets effectively highlighted children's immediate needs, they should now be developed to include more detailed information and become embedded for use for the younger children. We also asked the service to introduce a chronology of pastoral care and significant events for each child.

This would provide children with more precise and tailored support and intervention, especially for those children who do not yet have a diagnosed need but require specific strategies for support. This would improve continuity of care especially during staff changes across rooms.

Quality Indicator 1.3; Play and learning.

We evaluated this individual quality indicator as very good due to the strengths identified.

Planning in the three to five room was very responsive, supporting children's learning and progression. Children were actively engaged in evaluating their own learning through various mediums such as floor books, journals, and learning walls, which empowered them to become assessors of their own progress. In the younger children's room, staff were implementing new planning strategies, using schemas (repeatable patterns of behaviour) to enhance children's play and learning experiences. As a result, children were able to lead their own learning and access all areas of play with minimal interruptions. This supported a seamless and self-directed learning environment.

Creative and risky play opportunities were promoting children's physical and cognitive development. All children had access to the forest, trim trail and large apparatus in the hall, supporting their overall development and fostering a sense of adventure and independence. Children engaged in activities such as climbing trees in the garden, where they were reminded about managing risks and could talk about safety measures, like not climbing too high. The forest visits, use of a fire pit, outdoor stage area, musical instruments, along with regular interactive storytelling sessions from a grandparents further enriched their children's creativity and risky play experiences.

Use of community resources had enriched children's learning experiences. Monthly visits from a child's granny, along with trips to shops, the library, local lunch club and a care home, have provided diverse and meaningful interactions. These activities have broadened children's understanding of their community, promoting social skills and real-world learning opportunities. Parents told us "They have a great relationship with the outer community, lots of visits to library, care home, old folks lunch club, local fire station to name a few."

The focus on language, literacy and numeracy was fostering children's communication and cognitive skills. Staff role modelling and appropriate resourcing have enabled children to express their needs confidently. Quality assurance identified opportunities to further enhance numeracy and literacy opportunities across the nursery. Staff champion roles supporting this development. Ongoing progress was documented in specific literacy and numeracy floor books, enabling children to revisit this learning. Increased labelling in the younger children's room would support children's choices and create a literacy-rich environment. Staff spoke about the use of 'sign-along,' however this was not observed as regular practice. The planned restart of the 'sign of the week' initiative will enhance the use of sign-along and further support young children's communication.

Most interactions included effective use of questioning which extended children's learning. However, some low-level interactions, such as repeating what children said, were noted. Encouraging the use of more 'I wonder' questions could enhance these interactions and provide children with further challenge.

Learning journals were accessible to children, who enjoyed looking at them and sharing their learning with their peers. These demonstrated their progress and achievements. Most of these contained good quality observations which were consistently recorded. Parental involvement in these was evident; however, this was not consistent across both playrooms.

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Identified inconsistencies were being addressed with staff support to further develop learning journals. Regular review and monitoring of next steps through data analysis ensured children's continued progress, meaning children were consistently supported in their learning journey. One parent told us "We frequently get the PLJ home to look over and add our own comments. It's great to see how they are developing and learning."

How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children/people and clearly outweighed areas for improvement.

Quality Indicator 2.2; Children experience high quality facilities.

Indoor and outdoor spaces were developmentally appropriate, offering inviting and comfortable environments. Core resources across the playrooms supported breadth of learning. The use of loose parts play materials outdoors and small, intriguing items in the younger room, developed through the curiosity approach, were providing interest to children's play. Staff identified there was scope to increase the level of challenge through improved resourcing across both rooms, which staff have identified. This would support children's increased engagement and depth of learning in their play experiences.

Positive actions effectively reduced children's risk of harm, for example identifying and minimizing potential hazards. Detailed risk assessments were held, and children were involved in carrying out their own risk assessments. Staff used the 'SIMOA' elephant to enhance children's understanding of risk. Hazardous items were mostly stored safely, and local authority reporting procedures were followed for any building and grounds hazards. This contributed to children's wellbeing and safety.

Information held on children was stored securely. Staff spoke confidently about how to maintain children's confidentiality within and outwith the setting. This limited unauthorised access and maintained children and families' privacy.

Most children's risk of cross infection was supported as they were encouraged and supported to wash their hands and practice good respiratory hygiene. We asked the service to ensure that handwashing was consistently carried out using running water and soap as opposed to wiping with a tissue after eating. Playrooms were clean and well-ventilated. Further attention to cleaning within the nappy area is needed. Storage of resources within the nappy change and disabled toilet area had potential for increased risk of cross infection. We asked the service to consider the relocation of these along with the mop and bucket to reduce potential for cross contamination and support children's health. The ventilation fan in the nappy change area was not working and should be addressed to reduce potential odours.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Quality Indicator 3.1; Quality assurance and improvement are led well.

The school had successfully established a shared vision, values and aims, that nursery staff and children engaged with. This shared approach ensured that the whole school community actively celebrated these values, contributing to the positive ethos.

The service had established effective quality assurance measures, including self-evaluation and improvement plans with realistic targets. Plans were specific, measurable and achievable. Progress on action plans was consistently evaluated by the whole staff team ensuring a shared approach. A quality assurance calendar was also used to support ongoing improvements. We highlighted further attention to the monitoring of the younger children's room to maintain consistency across playrooms, enabling reflection and improvement with staff. The manager had already identified this an area for improvement and was actively addressing it.

The service effectively involved children and families in its development, with parental engagement being a strength. Various feedback opportunities, such as 'cuppa chats', ensured parents could meaningfully contribute to continuous improvement. A number of parents commented positively on the range of information available to them, especially within the main entrance along with online communication and opportunities to be involved. Overall, parents either agreed or strongly agreed that they were involved in improvement of the service and told us "I think Auchtermuchty nursery is a really great nursery and I'm very happy with my children attending the nursery".

The team had been proactive in using quality assurance tools, such as the new 'Setting the Table' guidance, to evaluate and improve mealtimes. References to HGIOELC (How Good is Out Early Learning and Childcare) and Quality Framework indicators were integrated into the ongoing quality assurance process and were used by all staff, ensuring a thorough approach. Regular opportunities for visiting other services and sharing with other settings, along with joint learning opportunities during in-service days, further enhanced efforts for continuous improvement.

Increased leadership stability was enabling staff to feel supported and confident in approaching management. This created a supportive environment for clear direction and built trust across the whole team.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Quality Indicator 4.3; Staff deployment.

Children benefitted from the diverse mix of staff skills and experiences which had contributed to skills sharing and improved the learning environment for children. Staff champion roles were matched to their individual skills and interests, supporting ongoing improvements. Planned peer mentoring of learning journals will further develop trust and confidence within the team, enhancing collaboration and improving consistency within journals.

Clear communication and teamwork amongst staff supported changes, such as the movement of children between rooms, ensuring smooth transitions. Staff maintained effective communication when moving within rooms to carry out specific duties, keeping each other informed about team deployment. They positioned themselves well within the playroom and outdoors, and at the start and end of the day. This maintained a close overview and supervision, supporting children's safety. We shared some parental feedback with the head teacher and asked them to continue to monitor and support communication with families. This is to maintain continuity for children.

Maintaining a suitable number of adults to meet the children's needs further enhanced safety and quality of care. This created a secure and well-supervised environment for the children.

The planning of staff breaks ensured that children's lunchtime experiences remained uninterrupted, while staff members received necessary breaks for their wellbeing. Additionally, staff members demonstrated a level of awareness and support for each other, particularly during cold weather when on outside duty. This approach promoted staff welfare, along with maintaining quality of care for the children.

The management of staff absences was effective, resulting in minimal disruption to children's routines. The use of two school pupil support assistants for the nursery provided additional cover, enhancing the continuity of care for the children. This approach ensured that children's daily care, play and learning experiences remained consistent and stable in the event of staff absences.

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	5 - Very Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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