

Mini Monkeys Day Care of Children

Brunel Road West Gourdie Industrial Estate Dundee DD2 4TG

Telephone: 01382 624 312

Type of inspection:

Unannounced

Completed on:

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Service provided by:

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Service no:

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Inspection report

About the service

Mini Monkeys provides a daycare of children service in Dundee. The service is registered to provide care to a maximum of 45 children who are not yet attending Primary School, of whom no more than 9 may be under the age of 2 years.

The service is located within an industrial estate in Dundee. The service is close to a country park, shops, play parks and a local library.

About the inspection

This was an unannounced inspection which took place on Thursday 13 February 2025 between 08:50 and 16:50. 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 children using the service and reviewed MS Forms feedback from 22 of their parents/ carers:
- spoke with staff and management;
- · observed practice and daily life;
- · reviewed documents.

Key messages

- Children were happy and having fun in the nursery.
- Staff were warm and friendly, creating a positive environment for children and families.
- Staff responded well to children's individual needs and interests to support their care, play and learning.
- Management and staff should continue to develop the environment in consultation with children and families.
- Quality assurance processes and self evaluation should be further developed to ensure it is embedded into practice and promotes continuous improvement of the service 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?	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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 1.1 Nurturing care and support

Children were happy and settled in the service as they played and learned, many with their friends. There was laughter and a relaxed atmosphere within the playrooms. Staff were kind, caring and nurturing in their approach with children, down at their level, and offered encouragement and cuddles when needed. As a result, children were relaxed and settled around staff and in the nursery environment. Staff knew children well and were responsive to their needs and interests, with children confidently approaching staff when they needed support or reassurance. There were strong attachments between staff and children and new children were being supported in developing attachments, ensuring children felt safe and secure. A parent said "All the staff are lovely and approachable. My son has a really good relationship with them and always comes home very happy".

Children were encouraged to be independent whilst attending the service. They were leading their own play, choosing where and the resources they wished to play with. The babies fed themselves at snack and lunch times, helped when needed by staff. The children in the 2-3 room and the 3-5 room cleared their plates when finished. The older children were putting on/taking off wellies and outdoor suits when choosing to play outdoors. These opportunities encouraged life skills.

Personal plans were in place for the children, containing information to help staff care for and meet individual needs. These plans were reviewed at least every six months. Whilst we saw that updates had been made, it would be helpful if these updates were dated to correspond with the review, so that staff can easily see when information had been updated and what was current. A parent commented "I am asked questions consistently about my child and how she's developing at home". Another parent said "The team regularly ask us to update the personal plan as the little one progresses and ages". Management and staff should ensure there is consistency within the content of the personal plans, for example, all plans contain parental permissions and chronology sheets.

Staff in the baby room were responsive to children's needs and routines from home, with babies going down for a sleep as they needed. Staff had discussions with parents to ensure routines were known and followed. These routines were recorded in the children's personal plans. The service had developed their knowledge and practice of the safe sleeping guidance to ensure children were safe and comfortable as they slept. Children in the 2-3 room were provided with flat beds after lunch to rest or sleep, with their jumpers and shoes taken off for comfort. Staff soothed children and supervised them as they slept, ensuring they were safe.

Mealtimes should be further reviewed to ensure the best experience possible for the children. Staff should consider further opportunities to encourage children's independence, for example, children serving themselves from dishes/bowls on the table. This would allow staff to sit with the children interacting and modelling social and life skills and be less task focused. The size of serving utensils should be reviewed to ensure they were smaller and easier for children to use and develop their life skills.

Medication was appropriately stored in the service. Paperwork should be updated to include the signs/symptoms the child would display for the administration of the medication and the recording of the first

dose. The manager talked of a more recent medication paperwork being in place, we encouraged that this paperwork be used throughout the nursery. All paperwork should be completed in full, signed and dated by parents and reviewed at least every three months. This would ensure all information is current and support children's health and wellbeing.

Quality Indicator 1.3 Play and learning

Children were engaged in leading their own play, moving independently around the indoor space. The older children had free flow access to the outdoors from their playroom and most of the children enjoyed playing outdoors, for example, jumping in the puddles and playing on the swing. The children in the 2-3 room and the baby room also had fun playing in their garden space during the inspection visit.

Children had resources available to them indoors and outside which were age and stage appropriate, such as wooden loose parts, sand and painting. These resources encouraged and supported children's creativity and imagination. Staff talked of observing children's interests and providing toys, resources, activities and opportunities to meet these interests, such as loose parts, dinosaurs, music and dancing. A parent shared "Every day there is a variety of play experiences that allow my child to flourish, develop and build confidence. My child has recently enjoyed climbing and the staff appear to follow his interests well and have recently added a new climbing frame that he loves". The service had introduced the curiosity approach and further embedding of this was needed to encourage children's confidence, critical thinking and problem-solving skills. The indoor and outdoor environments should be further developed to support children's curiosity, play and learning. Staff were observant and responsive to children's needs, for example, two children in 2-3 room were running around the room, staff were responsive to this, asking if they would like to go outdoors and run of some of their energy, which they did.

There was some evidence of literacy and numeracy within the nursery environment. Children in all playrooms enjoyed stories being read by staff, singing nursery rhymes and action songs, number lines and numbers were displayed in the rooms. Some of the older children had a discussion with a staff member about numbers. The younger children had fun playing Hide and Seek outside taking turns to count. Outdoors there was signage, named stations such as mud kitchen. The children's voice had been included in some displays, in the playrooms. Staff should reflect on further opportunities to develop and support literacy and numeracy throughout the environment to encourage and support children's curiosity and confidence.

Planning approaches were responsive to children's interests and observations from staff. Staff were being supported to implement this approach within the service using floorbooks. We encouraged the manager and staff to continue developing this approach to ensure effective monitoring of children's progress. The continued development of staff knowledge of curriculums and national documents will help them support children's play, learning and the recording of this.

Children had opportunities to access the local and wider communities, such as trips to Sensation Science Centre, walks and visits to the shops. These outings encouraged children to become familiar with their surroundings and nature.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

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Quality Indicator 2.2 Children experience high quality facilities

Children were welcomed into a ventilated environment with natural light. Playrooms were spacious and provided space for children to move around unhindered. Child height furniture and equipment ensured children were able to play, learn and eat in comfort. There were displays and artwork around the service, some with the children's voice recorded. These allowed children to revisit their learning and the art/craft activities they had been involved in.

The manager told us that the nursery was to be painted soon, which we would encourage as it is looking tired. Infection control measures were in place; however, these should be reviewed to ensure the environment is clean throughout and the necessary steps taken to ensure infection spread is minimised. For example, more handwashing, the appropriate storage of items and Personal Protective Equipment (PPE) within toilet and nappy changing areas and ensuring sealant around sinks is clean or replaced where needed.

The playrooms were equipped with age appropriate resources, including natural and open ended, which were easily accessible to the children either on the floor or on shelving in child height storage units. The resources available in the playrooms encouraged the children's interests. The babies were currently interested in dinosaurs and natural loose parts. The resources available in the 2-3 room reflected the interests of the children, where they were having fun in the sand, gluing and climbing on the equipment. They enjoyed time outdoors in their garden and in the 3-5 garden after lunch time. Children in the 3-5 room were engaged in role play, enjoyed stories read by staff, painting in the afternoon and had fun in the garden. These resources and experiences encouraged and supported children's curiosity, thinking skills, physical development and exploration.

Written risk assessments were in place to ensure all hazards and risks were identified and addressed so that children and staff were safe inside, outdoors and when on outings and trips. Risk assessments were reviewed regularly and updated as necessary.

How good is our leadership?

3 - Adequate

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

Quality Indicator 3.1 Quality assurance and improvement are led well

The vision and values of the service were in place and shared with families to ensure clear expectations and direction for the service.

Families, children and staff were regularly consulted to support the continuing development of the service and their improvement journey. This ensured everyone was given the opportunity to be included and give feedback to support the improvement journey.

We could see the quality assurance processes were developing within the service. Some monitoring and auditing were taking place, including reflective practice. An improvement plan had been created. The manager talked of identifying three priorities to work on within the improvement plan to support positive outcomes for the children. Further development of the quality assurance processes was needed to ensure a robust and continuous process that supports evaluation, reflection and improvement. Management and staff may find the webinars within the ELC improvement section on the Care Inspectorate website beneficial

in developing their knowledge of self evaluation along with a thorough knowledge of frameworks and bench marking tools. This area for improvement is continued from the last inspection. (See area for improvement 1).

New staff employed in the service followed an induction plan which supported them in becoming familiar and knowledgeable of their roles and responsibilities. This was recorded and dated. The National Induction Resource may be of benefit in supporting staff and providing opportunities for reflection on knowledge, practice and roles. This was an area for improvement from the previous inspection and has now been met. Appraisals were carried out between management and staff. These could be more detailed, with staff supported to be more reflective when completing them. These meetings could provide the opportunity for in depth discussions about practice, knowledge and the support needed for staff to be reflective practitioners.

Policies and procedures were in place to support staff practice. We asked for some of these to be reviewed further, to ensure all information was current and relevant. This meant staff had up to date knowledge of policies and procedures which would support them in their roles and responsibilities.

Areas for improvement

1. To ensure effective self-evaluation of the service, the provider should develop a more robust quality assurance process. This could include developing consultations with children, families and staff and using an appropriate benchmarking tool for self-evaluating the service. Staff could also be empowered to take responsibility for tasks within the improvement plan.

This is to ensure 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).

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 4.3 Staff deployment

There was a mix of knowledge, skill and experience in the team. Some of the staff team were new in post and talked of settling well and enjoying their roles and responsibilities. The previously shared manager post had recently become a sole manager position, with the manager gaining experience in undertaking this role as an individual.

Staff were flexible in their deployment ensuring ratios and children's needs were met and continuity of care was provided throughout the day. Staff lunches and breaks did not impact children's experiences or needs.

Staff worked well together, were respectful when communicating with each other and talked about being supported and supporting each other.

Staff had undertaken mandatory training, such as child protection and first aid. They had also carried out a

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variety of training to support and improve their practice and knowledge through online courses, inhouse training and professional discussions. Staff recorded their training, with a description of the course and were now beginning to reflect on their learning and the impact of this on their practice. We encouraged the team to reflect on all training that was undertaken. A training plan was in place identifying the individual training and learning needs of the staff team. This was an area for improvement from the last inspection and has now been met.

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 effective self-evaluation of the service, the provider should develop a more robust quality assurance process. This could include developing consultations with children, families and staff and using an appropriate benchmarking tool for self-evaluating the service. Staff could also be empowered to take responsibility for tasks within the improvement plan.

This is to ensure 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 16 May 2023.

Action taken since then

While we saw consultations with families had been carried out along with some monitoring and auditing further development of self evaluation was needed to ensure a robust quality assurance processes were embedded. Staff should develop their knowledge of bench marking tools to support them in evaluating the service and providing quality outcomes for children.

This area for improvement has been continued at this inspection

Previous area for improvement 2

To ensure a more robust induction process, the service should use a staged approach over an agreed timescale to complete all induction tasks. The service should use the Early Learning and Childcare - National Induction Resource to support best practice.

This is to ensure that care and support 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, are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14).

This area for improvement was made on 16 May 2023.

Action taken since then

Staff spoke positively of the induction process. They felt supported when taking up their post and were developing their knowledge of the children and nursery routines. The manager talked about tailoring the induction process to individual staff and their needs. We suggested the whole staff team work through the National Induction Resource to support knowledge and practice.

This area for improvement has been met.

Previous area for improvement 3

To support the staff team's professional development and improve play experiences and outcomes for children, the provider should implement a targeted training plan which includes developing knowledge of current best practice documents. Staff should also be supported to further develop their evaluations of training and show the impact of this on their practice.

This is to ensure that care and support 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, are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14).

This area for improvement was made on 16 May 2023.

Action taken since then

A training plan was in place identifying professional development, training and learning. Staff had undertaken mandatory training and a variety of learning opportunities to develop their knowledge, skills and practice. This was improving play experiences and outcomes for children. Staff should continue to develop their knowledge and skills, recording and reflecting on their learning and the impact of this on their practice.

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?	4 - Good
4.3 Staff deployment	4 - Good

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