

Nether Currie Primary Early Learning and Childcare Day Care of Children

57 Thomson Crescent Currie EH14 5JS

Telephone: 0131 449 3140

Type of inspection:

Unannounced

Completed on:

30 January 2025

Service provided by:

City of Edinburgh Council

Service no: CS2022000252 Service provider number:

SP2003002576



Inspection report

About the service

Nether Currie Primary Early Learning and Childcare is registered with the Care Inspectorate to provide a service to 55 children aged between 2 years and entry into primary school, of those a maximum of 15 may be aged between 2 and 3 years.

The setting is part of Nether Currie Primary School and is situated in a separate building within the school grounds. The building provides large open plan play spaces, staff/meeting facilities, children's toilets, cloakroom and direct access to a large outdoor play space.

About the inspection

This was an unannounced inspection which took place on 27 January 2025 between 9:30 and 15:45. 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 several children during their play
- reviewed digital comments from seven families
- spoke with the staff group and leadership team
- · observed practice and daily life
- · reviewed documents.

Key messages

- Children were confident and having fun in the setting.
- Staff supported children well through the nurturing and positive relationships they had developed with them.
- Some aspects of mealtime could be further developed to ensure that all children had a meaningful experience at this time.
- The indoor environment provided children with high-quality resources. Consideration on how to enable the safe use of the wider outdoor area should be given.
- Self-evaluation and quality assurance were having a positive impact to promote improvement.
- Parents were positive about the enthusiastic, friendly and professional staff team.

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?	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 experienced kind, warm, caring and nurturing approaches from staff. Staff knew children and families well and responded sensitively to their individual needs. The strong relationships that had been built with children and families contributed to the welcoming atmosphere. Children were spoken to and treated with warmth, kindness and respect. This supported them to be confident and secure in their interactions with staff and other adults in the setting. Parents commented "Key staff are welcoming and positive. They seek to reassure and connect with my child and myself." "Staff are friendly and happy to chat at drop off and pick up. Staff clearly have a good bond with the children."

Children were well supported through transitions into the setting and throughout the day. Staff provided reassurance to children who were new to the setting and adapted placement choices to ensure that they supported children's individual needs. Staff and leaders should give further consideration to the pace of the day to ensure that it met individual needs and did not result in some children having their opportunities for free choice being overly limited through their day.

Improvements had been made to the systems for personal planning. The keyworker system was effective in ensuring that staff had opportunities to collect information about each child. This helped staff to meet children's individual needs. Where needed, more detailed support strategies had been developed in consultation with parents. Staff had effective relationships with a range of childcare professionals and used these to make and evaluate support plans. We asked staff to ensure that information about children that might be held elsewhere in the setting, was updated to accurately reflect the current support that children required.

Overall, the procedure for lunch provided children with a meaningful experience. Children were offered a relaxed mealtime where they could make choices, develop independence skills and socialise with their peers and staff. We have asked staff to revisit some of the organisational aspects to ensure that there were enough staff at meal time to fully support children as they ate.

Children's health and wellbeing was well supported in the setting. Procedures for children's protection and safeguarding were clear. Staff knew current reporting procedures and carried out regular training to refresh their skills and knowledge. Children's medical needs had been recorded and medication administration procedures were detailed for staff. Children were provided with healthy snacks and opportunities for drinking water throughout their day. Food allergies and preferences were detailed to promote children's wellbeing. The leadership team should revisit the medication procedure, food preference and allergy systems with staff to ensure of a consistent understanding of these processes.

Quality indicator 1.3 - Play and learning

Children had fun as they experienced well planned and good quality play, learning and development opportunities. The planning of children's play and learning was based on children's interests and intentional promotions such as seasons, celebrations or topics. Staff understood their planning process well and took

part in regular planning meetings to ensure that experiences developed in line with children's interests, ideas and next steps.

Many children were actively leading their own play and using the range of resources available to them both indoors and outdoors. Core provision for literacy and numeracy was provided throughout the setting and children were having fun with number puzzles, mark making and reading stories. Consideration could be given to the availability of resources to extend children's ideas and refreshing some areas to ensure that they provided rich and interesting learning environments. For example, displays needed revisited to stimulate children's interest and provide learning and additional resources were needed to support some aspects of play such as outdoor music.

Keyworkers were keeping track of children's development through observations and the use of next steps. Local Authority trackers were used to identify children's progress to develop key skills and areas of learning. Learning and skill progress was assessed by staff and shared with parents through the digital platform and there were parent consultations over the year. However, parents indicated that they could talk to staff about their child's development at any time.

Considerable work had been carried out by staff to develop the skill of providing good quality support for children during their play. Staff now needed to work on the consistency of these interactions to ensure that opportunities to extend learning were not missed.

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 indoor environment provided children with a very well furnished, comfortable place in which to play and be cared for in. The environment was full of natural light and well ventilated. All areas were easily accessible for children to develop their confidence and independence. Children had enough space for their play and could play in groups or by themselves. There were also good facilities for the provision of food, for staff and meetings with parents and external professionals.

Part of the outdoor area was available for children to use for significant periods of the day. Children's physical health was promoted through this active outdoor play and children had fun with a range of opportunities for wheeled toys, balancing, climbing, building and running.

The leadership team and staff had risk assessed the outdoor area and as a safety precaution had limited the use of part of the area. They were aware that this limited some of the opportunities for children and were actively looking at ways in which they could safely facilitate the use of the upper part of the outdoor area.

The indoor environment provided space for children to sleep if they wanted or needed to. Staff described sleeping arrangements which met good practice guidance and supported children's wellbeing. There were additional cosy spaces for children to relax, look at books or take part in quieter play. This gave children opportunities to rest and refresh during their busy day.

Procedures and facilities for nappy changing met with current good practice guidance and infection prevention and control practices were good at these times. Some additional guidance could be given to

Inspection report

children regarding handwashing before meals and during key parts of the day, such as after outdoor play. This would help children to form good hygiene habits.

To ensure children's safety there were a number of risk assessments for the setting, outings and activities. Children helped to assess some of the safety aspects of their own play. This encouraged them to develop an understanding of how to keep themselves safe. Entry and exit from the setting was safe and secure and well managed by staff. The setting was clutter free, clean and kept attractive and well organised throughout the day. This gave children a pleasant place to play.

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, therefore we evaluated this key question as very good.

Quality indicator 3.1 - Quality assurance and improvement are led well.

The vision values and aims for the setting were displayed for parents to see. During our visit we observed in practice and heard from staff that that these were live in terms of the setting providing a safe, nurturing and fun environment and working in partnership with families.

Quality assurance, including self-evaluation and improvement planning were in place and leading to continuous improvement. A structured approach to assuring quality of provision for children was taken so staff were clear about the role they had in this. The improvement plan was displayed for staff and parents to ensure that the progress in addressing the improvement priorities was shared.

A range of processes were in place to ensure high-quality outcomes for children were being maintained through auditing and monitoring. This included monitoring processes and procedures, monitoring practice and parts of the day such as lunches and group times.

Regular staff meetings took place to offer opportunities for staff to be actively involved in the development of the setting. Staff meetings were used to develop reflective practice and give opportunities to be actively involved in the development of the setting.

As a relatively new setting, the leadership and staff team had continued to build on their positive relationships with parents and establish their role in the local community. The support needs of families had been identified and opportunities for Stay and Play sessions had been provided to include parents and wider family members. Some staff were trained to deliver Peep Learning Together Programmes and consideration was being given to the delivery of these sessions.

Comments we received from parents indicated that parents felt overall their views were sought and considered. We asked the leadership team to continue to adapt methods of gathering views and comments from parents to ensure that all parents had the opportunity to be included.

Children were settled and confident in the setting. They communicated what they wanted to staff and the systems for personal planning, planning of experiences and the building of relationships between staff and children enable their voice to be heard.

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

The leadership structure was consistent and used to ensure that tasks and responsibilities were clearly defined though out the setting. The staff group provided good consistency of care for children through well planned staff rotas. Breaks were well planned and arranged to ensure that staff were rested and refreshed during the day.

There were enough staff in the setting to ensure children's wellbeing. They worked well as a team and provided a good level of support for children. However, there were times during the session that some staff became focused on tasks and missed the broader supervision and support needs of some children or their colleagues. We asked that this was monitored in aspects of the lunch provision and group times.

There was a mix of staff skills, knowledge and confidence in the setting. This diversity was being well used to develop opportunities for experienced staff to provide mentoring and modelling of practice. The leadership team were visible and played a key role in promoting good practice. Staff were keen to support each other's professional development and spoke positively of their colleagues' strengths. This helped staff to work collaboratively to promote positive outcomes for children and families.

Parents spoke positively about the staff team and the relationships that had been developed between staff, parents and children. Comments included "They are friendly and approachable. I feel I could easily raise any concerns I have with them." "I feel comfortable round all the staff and get good communication back from them." "The staff are happy to take on board any concerns or anything we wish to be focused on."

The systems for staff development were based around support which helped to give encouragement to staff. There were opportunities for staff to have check in meetings and the leadership team were aware of the need to promote staff wellbeing in tandem with expectations of professional practice.

There were opportunities for staff to take responsibilities for aspects of the setting. The leadership team should continue to strengthen this approach to ensure that staff could share their enthusiasm and skill to provide high-quality outcomes for children.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 30 May 2024, the provider must ensure that the safety and wellbeing of children is promoted across the service.

To achieve this the provider must, at a minimum:

- a) submit a plan detailing how the risks to children's safety posed in the outdoor play area and described in the service's risk assessment will be addressed
- b) the plan must include appropriate timescales for completion of work to be carried out which reflect the significant risk to children's safety
- c) ensure that an effective interim risk assessment is developed, in collaboration with health and safety professionals. While a permanent solution is implemented.

This is to comply with Regulation 4 (1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe.' (HSCS 5.19).

This requirement was made on 8 March 2024.

Action taken on previous requirement

A plan was submitted regarding how safety issues identified by the setting would be mitigated.

The plan included timescales for removal of the boulders and sandpit at the bottom of the steep slope. This has now been achieved.

The interim risk assessment included not using the area of garden at the top of the slope rather than adapting the area to ensure that it could be safely used by children. This limited the positive outcomes for children in the setting.

We comment further on plans that the setting have to adapt the area so that it can be safely used.

We have deemed this requirement to be met as the significant risk factor have been removed.

Met - outwith timescales

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 that children get the right support at the right time. Staff should ensure that recordings of observations and information are made and used to assist to develop personal planning and make evidence-based assessments.

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

This area for improvement was made on 8 March 2024.

Action taken since then

The keyworker system was being used effectively to ensure that there were regular, detailed observations and assessments of each child's development.

This area for improvement was met.

Previous area for improvement 2

To ensure that children receive individualised care and support throughout the setting, information that has been gathered about children and their needs, should be used to develop appropriate strategies to meet children's needs and support developmental progress. These strategies should be shared with all staff to ensure a consist approach to care and support.

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 8 March 2024.

Action taken since then

Children who needed more detailed support had plans which had often been developed with other childcare professionals. Plans were shared with staff to ensure a consistent approach to care and support. Support plans had been regularly reviewed to evidence progress and identify if additional action was needed.

This area for improvement was met.

Previous area for improvement 3

To support children's play and learning, managers and staff should create more challenging opportunities to discover, explore, experiment and problem solve. This play environment should be supported by staff interactions that develop learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which

Inspection report

states: 'As a child, I can direct my own play and activities in the way that I choose and freely access a wide range of experiences and resources suitable for my age and stage which stimulate my natural curiosity, learning and creativity. (HSCS 2.27.)

This area for improvement was made on 8 March 2024.

Action taken since then

There had been improvements to the quality of play and learning experiences provided for children. There were children who were leading their play and we have commented on the need to continue to develop these opportunities.

This area for improvement was met.

Previous area for improvement 4

To ensure that children's individual learning and development is tracked, and assessments are shared with parents. Managers and staff should develop their systems for recording children's progress and ensure that these are completed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states: 'I am supported to achieve my potential in education and employment if this is right for me.' (HSCS 1.27)

This area for improvement was made on 8 March 2024.

Action taken since then

The use of local authority tools for tracking of children's development was now well embedded and consistently used by staff.

Staff completed observations on children's learning and development on the digital platform. These provided a good overview of children's progress.

This area for improvement was met.

Previous area for improvement 5

To support children's health, wellbeing and learning. The manager should develop a targeted training programme to address any gaps in staff practice. This should take into consideration the findings from this inspection, leadership observations and assessments, along with staff's individual reflections and requests. Developing these skills will lead to positive outcomes and learning for the children and further develop and strengthen the skills, knowledge and experience of the staff team.

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 8 March 2024.

Action taken since then

Staff had taken advantage of training opportunities provided to them. Additional opportunities for the development of professional practice had been given through self directed reading and reflective practice discussions at team meetings.

This area for improvement was 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?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.