

Busy Bees at Inverurie Day Care of Children

Burghmuir Place
Inverurie
AB51 4FW

Telephone: 01467 623 240

Type of inspection:
Unannounced

Completed on:
5 February 2025

Service provided by:
Busy Bees Nurseries (Scotland)
Limited

Service provider number:
SP2003002870

Service no:
CS2020380339

About the service

Busy Bees at Inverurie is registered to provide a care service to a maximum of 200 children at any one time. The service is part of Busy Bees Nurseries (Scotland) Ltd, a private limited company delivering early learning and childcare.

Conditions of registration for the service are as follows: -

The service is registered to provide a care service to a maximum of 200 children aged between 3 months and primary school entry at any one time.

- of those 200 no more than 38 are aged under 2 years;
- no more than 60 are aged 2 years to under 3 years;
- no more than 72 are aged between 3 years and primary school entry;
- no more than 30 are attending primary school.

Care may be provided as follows:

BUSY BEES MAIN BUILDING:

- children under 2 years of age will be cared for upstairs: 28 in the baby unit (Bombos) and 10 in the baby annex.
- children aged 2 to 3 years will be cared for on the ground floor (Bumbles).

BUSY BEES BUILDING 2:

- children aged between 3 years and primary school entry will be cared for from Buzz 1 and Buzz 2: 36 children in each room.

BUSY BEES AFTER SCHOOL HUB:

- children of primary school age will be cared for from the after-school hub.

Adult: child ratios will be a minimum of:

- Under 2 years - 1:3
- 2 years to under 3 years - 1:5
- 3 years and over - 1:8 if the children attend more than 4 hours per day, or
- 1:10 if the children attend for less than 4 hours per day
- If all children are over 8 years old - 1:10

The named manager of the service, or the person acting in that post should they not be present, will be 100% supernumerary.

The service is situated in Blackhall industrial estate in the town of Inverurie, close to local amenities. The service consists of three buildings, within close proximity of each other. Secure outdoor play areas are directly accessible from some of the playrooms. Throughout the service there are toilet and changing facilities. Other facilities include, offices, a kitchen and staff rooms.

About the inspection

This was an unannounced inspection which took place on 4 and 5 February 2025. The inspection was carried out by three 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
- reviewed feedback received from 15 families
- reviewed feedback received from 13 staff
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy, settled and confident in the setting.
- Children were engaged in various play experiences and activities and were supported by responsive staff when appropriate.
- Quality assurance processes were now leading to improved outcomes for children and families.
- Management should continue to monitor staff deployment especially over transition periods.

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

Overall, children experienced warm, caring and nurturing approaches from staff which supported their wellbeing. They were happy and relaxed in the company of staff and approached them with confidence. Staff responded to children's cues for support which helped children to manage their emotions. This supported children to feel valued and safe. Families shared with us, "Staff are all so friendly and you can tell they love their job as all the kids adore them".

Nappy changing provided a nurturing experience for children. Children were respectfully invited to get their nappies changed and staff interacted with them throughout the process. This was a relaxed, happy and social routine which provided valuable opportunities for positive interactions between staff and children.

Personal planning was in place for children which took account of the SHANARRI wellbeing indicators (safe, healthy, achieving, nurtured, active, respected, responsible, included). Information was gathered from families during settling in sessions. Staff spoke about how they used the information in plans to support children to settle. For example, providing children's favourite's toys or stories. This provided a continuity of care between the service and home.

Staff knew children well and shared their interests and preferences with us. For children requiring any additional support, staff were able to discuss with us how they were supporting children and individual risk assessments supported children's safety and wellbeing. The service should ensure that all children who require any additional support should have a care plan in place. This should contain identified strategies in place for supporting children and be understood by all involved in their care. This would support staff to take a fully consistent approach in meeting children's needs. We discussed with leadership how it would be beneficial to have support plans and risk assessments in playrooms which could be used as working documents. This would further support children's wellbeing.

Improvements had been made to the management of medication. Medication was stored safely with the appropriate permissions in place. Where required, staff undertook training to support with safe administration. Overall staff were clear on when children would require their medication. Audits of medication were being carried out effectively which supported children's safety and wellbeing.

There were some opportunities for children to be included and have ownership of mealtime routines. For example, some children helped set the table, poured their own drinks and cleared away their plates when finished. These opportunities could be developed further within all playrooms. This would help develop life skills and promote independence. Overall, mealtimes were a relaxed and social experience. We observed children who experienced a calm, unhurried positive lunchtime. Lunch in one playroom on day one did not provide a positive experience for children. Children waited for long periods for food to be served and as a result became unsettled. There were significant improvements to the lunchtime experience on day two of the inspection and the manager agreed to further monitor the mealtime experience for children. **(See area for improvement 1.)**

Children were able to sleep and rest in response to their needs and family wishes. Safe sleeping practices were in place. For example, individual sleep mats and bedding were used. Children's emotional security was promoted at rest times as staff knew how they liked to be settled. Regular checks were carried out on sleeping children to promote their safety. Cosy spaces throughout the setting provided opportunities for children to relax and take time away if they wished. This supported children's emotional wellbeing.

Quality Indicator 1.3: Play and learning

Children were happy and engaged in their play for most of the time. They enjoyed their time with staff and had fun as they explored their learning environments. Some children were confident to talk about their learning and experiences with us. This showed these children were meaningfully involved in their learning.

Children had fun when they accessed the outdoor spaces. Children enjoyed exploring the mud and bark with spades and trowels to find insects. This led to lots of discussions between children. This showed children were leading their play, using their imaginations and developing their social skills.

A variety of open-ended, loose parts supported children's developing curiosity and problem-solving skills. Some staff supported children through skilful interactions, commenting on their play and using meaningful and relevant questions to challenge their thinking.

Literacy and numeracy were evident through play and in the environment. Children had opportunities to develop their language and literacy skills through stories, singing, mark making and taking part in discussions. We discussed with leadership that some environments were richer in literacy and numeracy than others and discussed the benefit of staff sharing good practice. This would support ongoing improvements.

Regular planning meetings provided opportunities for staff to come together to discuss children's developmental needs and interests. Observations of play and learning were used to support the next set of planning. This supported staff to be responsive to the children's interests and developmental needs as well as incorporating intended learning linked to the curriculum. The majority of observations identified children's skills and learning. Children's targets and next steps were threaded through the planning to support progression and achievement.

Floorbooks were used to document play experiences and learning. Children took ownership of their learning through mark making and sharing their voice through the floorbook. Children revisited their learning with us reflecting on what they had learned. The staff should continue to develop these in all playrooms and support the children to revisit their learning. This approach would support a depth and breadth of learning across all ages.

Children had some links with their local community. They had opportunities to go on walks and to parks. This could be further developed to support children to become more familiar and value connections with their community.

Areas for improvement

1. To improve the quality of children's mealtimes, staff should ensure that meals are well-planned and children experience consistently nurturing approaches and supervision to support their engagement and safety. Children should be supported to be included in mealtime routines through opportunities to be independent and develop life skills.

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

'I can enjoy unhurried snacks and meal times in as relaxed and atmosphere as possible' (HSCS 1.35).

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

Children were cared for within three buildings. Under three's were cared for in the main building, three to five year olds were cared for in the Buzz building and school aged children accessed the out of school club building. These were all in close proximity of each other. All spaces were well ventilated and bright. The entrance to the main building provided a warm and welcoming meeting space for families. Overall, playrooms were clean, bright and comfortable with natural light and ventilation. The entrance area in the out of school club and Buzz building could be decluttered. This would ensure that all areas provide a welcoming environment for both children and families.

Staff shared maintenance and decoration concerns with management, however, they shared that these can take some time to be fully addressed. Management shared some plans for redecoration and refurbishment which we would encourage, especially in the out of school club where some areas were looking tired or very bright. This would give the message to all children that they feel valued.

The indoor environments provided a range of quality resources and furniture. There were opportunities for children to be independent and access their own resources to play with from child height storage. Some areas of the nursery could be further developed to ensure areas could be much better displayed to encourage children's independence. For example, labelled boxes, trays and shelves to support children to care for their resources.

Homely touches, which included fairy lights, soft furnishings and photos, helped children feel secure and provided spaces to relax. Children's artwork was displayed throughout the service, promoting their sense of belonging. There was still scope for the service to further enhance and soften the environment to create cosier and quieter areas. This would further promote children's wellbeing.

Some rooms benefitted from direct access to the outdoors. The garden area of the main building had been developed since the previous inspection which included the addition of a mud garden to support children's imaginative play. When children did access the garden they had great fun, however, this garden was not used to its full potential. Children did not approach the door independently and we discussed with staff the need to regularly remind younger children that they can access outdoors at any time. We discussed with staff within the Buzz building that children would benefit from free flow to the outdoor area, however, the door was shut on several occasions through the day. This resulted in children in this room becoming less engaged in their play. Staff should reflect on the use of the outdoor area to ensure this area is used to its potential and contains appropriate and accessible resources and materials to support learning.

Overall, a safe and secure environment was provided for children and staff. Risk assessments were in place which identified possible hazards and the mitigations that were in place. We would encourage children to

be more involved in assessing risks throughout their day within the indoor and outdoor environments. This would support children to develop an understanding of possible risks around them.

Staff practice in relation to infection prevention and control followed best practice guidance. Personal protective equipment (PPE) was used appropriately throughout nappy changing. Staff regularly washed their hands effectively and children were encouraged to wash their hands before eating and after nappy changing. We suggested that children should wash hands after eating to further support infection and prevention control measures.

Overall, accidents and incidents were managed well. Accident forms were completed and shared with families. An audit was completed to help identify hazards and triggers. We identified on a few occasions that ice packs were not readily available in rooms and staff had to source these from different areas of the nursery. This resulted in a delay in children receiving treatment for bumps. Management should ensure that ice packs are readily available for all staff to ensure children get treatment at the right time.

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 improvement are led well

A vision, values and aims were in place which was reflected across the service. Management, staff, children and families had been included and involved in a review. This showed that children and families benefitted from shared values which put children first.

Self-evaluation of the service had been developed using key documents. Monitoring of practice, environments and interactions had taken place which highlighted key strengths and areas for development. It would be beneficial for management to follow up on any areas for development that had been identified and evaluate any progress made. This would support ongoing improvements.

An improvement plan was in place which was clear, relevant and focussed. Any improvements were shared with families. This supported families to feel valued. It would be beneficial to ensure the improvement plan is evaluated regularly and identify and highlight the impact of changes and improvements. This would support ongoing development.

Staff received annual appraisals from management. These were specific and relevant to each individual staff member and were focused on staff development skills and training. To ensure the actions taking place are directly impacting children and the service, it would be beneficial to include outcome focused evaluations to support staff in understanding how their learning and development is supporting them in their role and having a direct meaningful impact.

Individual room meetings and staff huddles took place regularly and staff spoke positively about these. Staff shared room leads were approachable and felt they had a good working relationship within their rooms. Overall staff felt supported by management team, however, shared they would like more regular involvement from management within each room. This would support staff to feel fully respected and valued.

A detailed quality assurance calendar highlighted tasks to be undertaken throughout the year. This included

the review of personal plans, learning journeys, medication systems and accidents and incidents. Some issues that had been highlighted had not been followed up or sustained. For example, a mealtimes audit had highlighted that lunch could be further developed to offer more opportunities for children to be independent. It would be beneficial to consider ways of recording how the areas for development would be implemented. This would support the service to continue to develop and implement change to improve outcomes and experiences for children and families.

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

Staff were recruited safely and registered with the Scottish Social Services Council (SSSC) as appropriate. Staff spoke positively about the induction process that was in place. Regular check-ins with management were used to ensure staff had an understanding of their roles and responsibilities. This supported children to be safe.

Children benefitted from there being enough staff to meet their needs most of the time. We reminded the manager that staff to children ratios should be maintained at all times of the day, including transitions and outdoors. Staff were clear on their roles and who had responsibility for specific areas throughout the day. All playrooms had appropriate staffing levels, however, in one room staff were stretched to support the transitions before, during and after lunchtime. Following discussion with leadership this was better supported on day two of our inspection. Families shared concerns about staffing with us, "I think the staff do a brilliant job but are being pulled in many directions and often are trying to help several children do several different things at once. Seems like they are very stretched". **(See area for improvement 1.)**

Staff were given the opportunity to develop their skills and practice through a variety of professional development and learning opportunities, with several of the team undertaking qualifications relevant to their role. Most staff had completed core training which included first aid and child protection, which contributed to keeping children safe. To further enhance staff skills the management team were now identifying individualised training to inform practice. This provided targeted support to develop the skills, knowledge and experience across the staff team to ensure consistently positive outcomes for children.

Staff had developed positive relationships with families. Families were warmly welcomed by staff into the service. This supported families to feel included and respected as they heard about children's experiences and achievements. Staff were keen to collaborate with families to make improvements and develop practices to support children. One parent shared, "Friendly atmosphere, children always so welcome by staff in the mornings".

Areas for improvement

1. To promote consistently positive experiences for children across the day, staff should be deployed effectively to ensure care is child focused and responsive. Tasks should be well planned for and managed to minimise the impact on children's care.

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

'My needs are met by the right number of people' (HSCS 3.15); and

'People have time to support and care for me and to speak with me' (HSCS 3.16).

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

Requirements

Requirement 1

By 04 September 2023 the provider must ensure that effective and robust systems are in place to ensure that medication is safely managed in the service. To do this the provider must, at a minimum:

- a) ensure that current best practice guidance is used to inform procedures.
- b) ensure that medication records are completed consistently and contain clear and relevant information in relation to children's health conditions and care needs to support manage these safely and effectively.
- c) implement effective quality assurance systems to ensure medication is safely managed.
- d) ensure that all staff are aware and understand the health care needs of children in their care.

This is to comply with Regulations 4(1)(a) (Welfare of user) 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:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This requirement was made on 24 August 2023.

Action taken on previous requirement

Improvements had been made to the management of medication. Medication was stored safely with the appropriate permissions in place. Where required, staff undertook training to support with safe administration which promoted children's safety and wellbeing. Overall staff were clear on when children would require their medication. Audits of medication were being carried out effectively which supported children's safety and wellbeing.

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

Personal plans should be consistently recorded and should identify the health, care, safety and welfare needs of each child and how they will be met.

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 24 August 2023.

Action taken since then

Personal planning was in place for children. Staff knew children well and shared their interests and preferences with us. For children requiring any additional support, staff were able to discuss with us how they were supporting children. We asked the service to ensure that all children who require any additional support should have a care plan in place. This should contain identified strategies in place for supporting children and be understood by all involved in their care. This would support staff to take a fully consistent approach in meeting children's needs.

This area for improvement has been met.

Previous area for improvement 2

To improve the quality of children's mealtimes, staff should ensure that meals are well-planned and children experience consistently nurturing approaches and supervision to support their engagement and safety. Children should be supported to be included in mealtime routines through opportunities to be independent and develop life skills.

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

'I can enjoy unhurried snacks and meal times in as relaxed an atmosphere as possible' (HSCS 1.35).

This area for improvement was made on 24 August 2023.

Action taken since then

Whilst some improvements have been made to mealtimes there was still room for further improvements to ensure children are fully involved where possible in the preparation and self-serving to support the development of life skills and independence.

This area for improvement has not been met.

Previous area for improvement 3

To minimise the risk of infection spread staff should ensure they carry out effective handwashing consistently and in line with current infection control guidance.

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 based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 24 August 2023.

Action taken since then

Staff practice in relation to infection prevention and control followed best practice guidance. Personal protective equipment (PPE) was used appropriately throughout nappy changing. Staff regularly washed their hands effectively and children were encouraged to wash their hands before eating and after nappy changing. We suggested that children should wash hands after eating to further support infection and prevention control measures.

This area for improvement has been met.

Previous area for improvement 4

To promote consistently positive experiences for children across the day, staff should be deployed effectively to ensure care is child focused and responsive. Tasks should be well planned for and managed to minimise the impact on children's care.

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

'My needs are met by the right number of people' (HSCS 3.15); and

'People have time to support and care for me and to speak with me' (HSCS 3.16).

This area for improvement was made on 24 August 2023.

Action taken since then

Whilst some improvements have been made, there is further room for development to ensure that staff deployment does not further impact on staffs' wellbeing and children's experiences.

Staff should be deployed to enable children to free flow to the garden for the majority of the day. Lunchtime transitions should be further developed and planned for.

This area for improvement has not been met.

Previous area for improvement 5

To promote positive outcomes for children and support the development of staff skills and practice, the management team should ensure effective training programmes account for individual staff needs.

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

state that:

'I have the 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 24 August 2023.

Action taken since then

Staff were given the opportunity to develop their skills and practice through a variety of professional development and learning, with several of the team undertaking qualifications relevant to their role. Most staff had completed core training which included first aid and child protection, which contributed to keeping children safe. To further enhance staff skills the management team were now identifying individualised training to inform practice. This provided targeted support to develop the skills, knowledge and experience across the staff team to ensure consistently positive outcomes for children.

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?	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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