

Tiddlywinks Nursery School

Day Care of Children

Liff Road
Muirhead
Dundee
DD2 5QF

Telephone: 01382 581 581

Type of inspection:
Unannounced

Completed on:
12 February 2025

Service provided by:
Moorhead Nursery Ltd trading as
Tiddlywinks Nursery School

Service provider number:
SP2012011769

Service no:
CS2012306143

About the service

Tiddlywinks Nursery School provides a daycare of children service in Dundee. The service is registered to provide care to a maximum of 67 children at any one time of whom; no more than 10 are aged under 2 years; no more than 10 are aged 2 years to under 3 years; no more than 22 are aged 3 years to those not yet attending primary school and; no more than 25 are attending primary school. The use of the door from the main playroom for children aged 0-2 years must not be used as a main entrance/exit. Primary School age children will be accommodated at the following premises: Birkhill Primary School, Dronley Road, Birkhill, DD2 5QD and The Scout Hall, Liff Road, Muirhead, DD2 5QF.

The service is located within a residential area of Muirhead and is close to a local park, the local school, and woodland areas. The nursery consists of three playrooms, and two secure outdoor play areas. The school aged children access the Scout Hall which consists of a large hall, kitchen, toilets and an outdoor play area.

About the inspection

This was an unannounced inspection which took place on 10 and 11 February 2025 between 08:30 and 17:15. Feedback was shared with the service on 12 February 2025.

The inspection was carried out by an inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since the service was registered.

In making our evaluations of the service we:

- spoke with children using the service and 12 of their family members;
- spoke with staff and the management team;
- observed practice and daily life;
- reviewed documents.

Key messages

- Interactions between staff and children were warm, kind, and caring.
- Children were having fun, and most were engaged in their play experiences.
- All children attending the service should be provided with the opportunity for daily access to the outdoors.
- A risk assessment should be developed for the indoor and outdoor environments of the nursery setting.
- The management team should ensure that infection control procedures are always followed.
- Staff knew children well, which ensured their needs were fully met.

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?	3 - Adequate
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

Staff interactions were warm and caring and most of the staff knew the children well. Staff offered cuddles and comfort when appropriate or used distraction to support children when upset. Staff were consistently down at the child's level during interactions and play. It was evident that attachments had been formed between some staff and children. A parent commented that, 'the staff are always so welcoming and friendly.' Interactions between staff and school aged children were warm and quality discussions took place. This resulted in confident children who asked for help and support when required.

Personal care was respectful, and children were asked if they would like to have their nappies changed. Staff interacted with children throughout the nappy changing process and shared what was about to happen next. Personal protective equipment (PPE) was used, and appropriate handwashing took place by staff and children. Nappy changing was recorded and shared with parents in the Family app.

Personal plans which included enrolment forms, permissions and My World documents were in place for every child. These provided detailed information to ensure children's needs could be fully met and were reviewed at least every six months with parents. A parent shared 'They are updated every so often and we get a chance to change the information on it so it's up to date.'

Staff had all completed child protection training which was regularly refreshed to keep their knowledge and skills current and up to date. Staff knew who the child protection officers were and were confident in the child protection processes in place. Each child had a chronology in their personal plan where significant events or information was clearly recorded. This supported the safeguarding of children.

Medication consent forms were in place for children who required medication and included signs and symptoms to be aware of and how to deal with emergency situations. Management should ensure that all sections are completed in full within the forms. Medication forms should be reviewed with parents at least every three months to adhere to current guidance and to ensure information held is current and up to date.

Mealtimes were a valuable social experience for children. Staff sat with children, ate with them and interacted with them throughout the experience. The school aged children and pre-school children developed their independence and life skills by serving themselves, pouring drinks and clearing away and washing dishes. Independence was also being developed with the younger children, and it would be beneficial to extend these opportunities further to develop life skills. Water was available for all children throughout the day to keep them hydrated.

Children had the opportunity to rest or sleep while in nursery. Cots were available for younger children and flat beds were also set up with sheets and blankets. Children were supported by staff to fall asleep; comforters were provided, and children were offered cuddles or were rocked to sleep, dependant on specific preferences.

Quality Indicator 1.3 Play and learning

Most children chose where to play and what to play with. Provocations encouraged and prompted play which supported the development of curiosity and imaginations. Children in one room spent periods of time exploring shapes which was also extended into play within the sand. Children in the pre-school room were creative, developed imaginations and problem-solving skills and incorporated numeracy and literacy naturally into their play. For example, a group of children used chalk to design roads, buildings and bridges. They then used loose parts to build a car and go on a road trip using maps and invited a staff member to act as their satellite navigation system. School aged children had fun and chose from a range of play experiences which supported current interests. One parent shared 'There's a variety of activities from free play, cooking, arts, music, yoga, personal development, dancing and physical movement.'

Language, literacy and numeracy were evident throughout the service using a variety of resources. This included books, print around the rooms, measuring scales and telephones. This could be further developed in all rooms and staff should think about how to promote and develop this outdoors.

There was a nice pace to the day and children weren't rushed to finish or complete specific activities. However, staff should be mindful of which activities they have to clear away at specific times of the day to make way for mealtimes and sleep times. This could result in children losing interest in a specific activity or experience and the opportunity to extend this play could be missed.

The service had recently developed a new planning approach and used a floorbook to document children's interests, ideas and suggestions. Children's interests were linked to intended learning and the planning included challenge questions, learning questions and learning intentions which were displayed around the room. The evaluation of planning was currently being developed.

Observations of children's learning were recorded and shared with families on the Family app. Some of these observations identified clear and specific learning and progression for children. Next steps within learning were recorded along with most observations, however, there was limited evidence of these being taken forward and developed. This was something that the service were currently developing.

How good is our setting?

3 - Adequate

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

Quality Indicator 2.2 Children experience high quality facilities

The nursery was welcoming and displayed children's artwork and photographs of them and their families. This supported children to feel valued. Most areas were well resourced and included real life resources. There was a variety of toys and resources in all rooms which supported play and learning. There were comfortable areas in each room for children to access. These areas could be further developed to create quieter and more nurturing spaces for children to rest and relax. The management team were responsive to this suggestion.

The nursery was secure with high locks on the door in the main entrance and on gates leading from the outdoor play area. Management should ensure that any required maintenance is completed within a timely manner to provide a safe environment for children. For example, the skirting board was coming away from the wall in the baby room which could have resulted in children trapping their fingers behind it. This was repaired during the inspection. The service should also ensure that all rooms are ventilated to reduce the risk of spread of infection.

Staff carried out daily safety checks prior to children arriving in the service. It was discussed with management that there should be a risk assessment in place for the indoor and outdoor environments. Potential risks should be recorded within this risk assessment along with the controls that have been put in place to minimise these risks. This would ensure a safe environment for children. **See area for improvement one.**

There were no handwashing facilities within the toddler room for staff or children to access. They did access the handwashing sink in the baby room, but there were missed opportunities for staff handwashing to take place. We also identified that a specific area within the nursery would benefit from a deep clean. Management responded to this during the inspection. Handwashing at appropriate times and enhanced cleaning would reduce the possible risks of spread of infection. **See area for improvement two.**

The children in the pre-school room benefitted from free flow access to the outdoors. This encouraged them to take part in a range of active play experiences and activities to develop problem solving and develop their imaginations. Children had also grown herbs which they harvested, prepared and put in jars to use at mealtimes. This developed the children's knowledge of the seed to plate concept. The younger children had access to a small outdoor play area as well as accessing the pre-school garden. The younger children should be provided with the opportunity for daily access to the outdoors and fresh air.

Children went on trips within their local community. They visited the local shops, park and stables. Children also spent time exploring nature and took part in a variety of experiences within the local woodland area. These opportunities provided children with a sense of belonging. A parent commented 'my child loves the walks to the nearby wooded area and to see the horses.'

Areas for improvement

1. To ensure a safe environment for children to play and learn, the provider should ensure that a detailed risk assessment is created for the indoor and outdoor environments.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My environment is secure and safe' (HSCS 5.19).

2. To minimise the risk of spread of infection, the provider should ensure that appropriate infection prevention and control procedures are followed.

This should include, but is not limited to:

a) handwashing taking place at all appropriate times throughout the day and that staff and children have easy access to handwashing facilities;

b) regular deep cleaning of specific areas including the nappy changing area.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

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

The service had a vision, values, and aims which had recently been reviewed as part of a consultation.

Parents had been involved in the ongoing improvement of the service through questionnaires, sharing of feedback on the Family app and verbal communications. Parents attended a recent nursery event which was held in the scout hall. They were offered the opportunity to have a tour of the nursery and their children's learning environments. Parents shared with us that they would like more opportunities to be part of the daily life of the service. Management should continue to develop parental engagement and involve families in the daily life of the nursery.

The service had an improvement plan in place which identified specific priorities. The local authority supported the service with their quality assurance to identify strengths and areas for improvement. Management should use their improvement plan as a working document and include additional priorities as required. Staff shared that they now felt more involved in the quality assurance process and felt that they were being given more ownership of supporting improvement. A parent shared 'We are always asked about how we would like the setting to develop.'

Management used a range of processes to evaluate the service. This was broken down into a monthly calendar which identified tasks, audits, monitoring, and supervision to be completed. Management used an informal approach to monitoring staff practice and the sharing of feedback. This process could be further developed through the recording of good practice and specific areas to be developed. Peer monitoring could also be implemented to further enhance the self-evaluation of the service. The quality assurance processes in place were supporting the service to improve outcomes and experiences for children.

Safer recruitment and staff induction were well managed using current guidance. Staff shared that they felt well supported throughout the induction process.

Staff had completed mandatory training as well as additional training to further develop their practice and skills. Staff were keen to share the training they had attended and the impact it had on their practice. Management also held regular appraisal meetings with staff to identify strengths and possible areas for development to support and develop their practice.

The service had policies and procedures in place which were all recently reviewed. Management should update the links and references to guidance to ensure the most current guidance is stated within them.

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 service was appropriately staffed, and ratios were met and maintained. The manager and deputy supported all rooms throughout the day, especially over busier periods to ensure children's needs were met. Children were supported as required to move between rooms during mealtimes which promoted positive transitions. Staff breaks were managed well and had minimal impact on children's experiences.

Staff who had recently joined the team were being guided and mentored by management and the existing members of staff. Relief staff from a sister service who covered during times of staff absence were also well supported by the team.

There was a good mix of staff skills and experience within each room. Staff were motivated and keen to make ongoing improvements within the service. The team were respectful of each other. They were flexible and communicated well with each other asking for support when required. This approach ensured that children's needs were met throughout the day.

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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

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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