

St. Andrews Nursery Day Care of Children

Kilrymont Road St. Andrews KY16 8DF

Telephone: 01334 659 485

Type of inspection:

Unannounced

Completed on:

28 January 2025

Service provided by:

Fife Council

Service no:

CS2003015921

Service provider number:

SP2004005267



Inspection report

About the service

St. Andrews Nursery is a daycare of children service provided by Fife Council. The service is registered to provide care to a maximum of 84 children at any one time, aged from 15 months to an age to attend primary school.

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The service is a stand-alone nursery located in St. Andrews, within the grounds of Greyfriars Roman Catholic School. The service is in a residential area close to local amenities. Children are cared for across three playrooms each with direct access to outdoors.

About the inspection

This was an unannounced inspection which took place on 27 January 2025 between 09:30 and 16:30 and 28 January 2025 between 09:00 and 13:00. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- · observed children using the service
- spoke with children attending the service
- received feedback from 16 families
- spoke with the staff and management team
- observed practice
- reviewed documents.

Key messages

- Children experienced warm, caring and nurturing approaches to support their overall wellbeing.
- · Children were happy, settled and having fun during their time at nursery.
- Medication permissions should be improved to support the safe administration of medication.
- Parents were warmly welcomed into the service to drop off and collect their children.
- Play spaces were welcoming and inviting and provided children with ample space to play and explore.
- Children experienced unpleasant nappy changing facilities due to an intrusive smell.
- The committed leadership team promoted high aspirations for children through a shared vision. The service had a happy and welcoming ethos, promoting a positive atmosphere for children to play and learn.
- Quality assurance processes should continue to be developed to support improved outcomes for children.
- The deployment and levels of staff within the service were appropriate to ensure effective care and support for all children.

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 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 experienced warm, caring and nurturing approaches to support their overall wellbeing. They were happy, settled and having fun. Children were supported to make choices as staff were attuned to their routines and what was important to them. This contributed to children feeling safe and secure and, as a result, children were confident and engaged in their play experiences.

Snack and the meal times took account of the age and stage of children. Opportunities for children to be independent were provided as older children helped to prepare snack and experienced a self-service lunch. This created a relaxed and unhurried atmosphere which meant children were happy, confident and learning important life skills. Younger children had opportunities to be independent at snack time. On the first day of inspection, staff were at times focused on other tasks for example serving food, and didn't join children at the table. This meant younger children were not effectively supported at lunchtime. We shared our findings with the team, on the second day of inspection staff had begun to make improvements to create a more social experience.

Children's wellbeing and comfort was provided for with cosy spaces and nooks throughout the setting which supported most children's need for rest and relaxation. There was scope to further develop this approach to support children to have high quality sleep and rest experience.

Children's allergy needs were well-managed to help keep them safe. However, there were inconsistencies with the recording of medical information. For example, dosage information was not accurately recorded within permissions. This had the potential to put children at risk of receiving an incorrect dosage of medication (see area for improvement 1).

Effective partnerships had been formed with external agencies to help assess children's developmental needs. Children requiring additional support had individualised strategies in place, which were mostly reflected in practice. This resulted in them beginning to settle into their routines and being included in nursery experiences.

Children and families were valued and respected. Parents were warmly welcomed into the service to drop off and collect their children. Parents' comments included, 'The staff have supported us as well as the children. They take time to talk with us and offer their availability if we have any questions/concerns' and 'The ladies are friendly, very extensive and open to communicate anything I need to know or should know'. This contributed to creating positive attachments between children and staff, and enabled opportunity for information to be shared between nursery and home.

Quality indicator 1.3: Play and learning

Children were happy and had fun as they experienced good quality play experiences. Older children were provided with interesting and meaningful opportunities to play. For example, children independently made playdough and experimented with various ingredients in their creations. This created opportunities to problem solve, test their ideas and be creative. On the first day of inspection, we found younger children had a limited range of exciting and stimulating experiences available as core provision. For example, water trays had very little water in them. This meant that not all children were engaged in meaningful play. We shared this with the team who had begun to take action. On the second day of inspection, younger children were having fun splashing in the water tray and were engaged for prolonged periods of time.

Play experiences were in place to support children to develop skills in language, literacy and numeracy. This included mark-making, sorting and measuring. Staff were available to children for storytelling and discussions. This supported children's enjoyment of literacy and the development of their talking and listening skills. Staff's spontaneous singing created a sense of joy and supported the youngest children's language development.

Overall, staff understood when to engage and when to stand back to enable children to develop their play at their pace. Staff engaged younger children in a warm and kind manner. They were down at their level and offered support at a pace that was right for them. Older children were well-supported by staff who were skilled in effective questioning. Staff successfully scaffolded children's learning and widened their skills by enabling them to think and problem solve independently. We found this approach was naturally woven into conversations, embedded in practice and supported children very well to reach their full potential. In addition to this, staff had used daily discussions and interactions to promote children's understanding of their rights and responsibilities. Some children spoke confidently, and with pride, about being responsible and what they had achieved. They demonstrated a respect for their environment and happily contributed to nursery life and routines. As a result, children were happy, confident and eager to learn.

Child-centred planning approaches were mostly responsive to children's interests. There was scope for this to developed to ensure daily observations meaningfully inform future planning. Children's ongoing learning and developmental progression was supported using observations within children's Personal Learning Journals (PLJs). Recording of key learning and meaningful next steps for children was not yet consistent across all planning information. Developing a consistent recording approach would help to capture children's progress and support planning for next steps.

Areas for improvement

1. To effectively meet children's healthcare needs and support the safe administration of medication, the service should ensure that medication permissions are accurately recorded.

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).

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.

Quality indicator 2.2: Children experience high quality facilities

Playrooms were bright, well-ventilated and furnished with natural furniture which created calm and relaxing environments. Playrooms were welcoming and inviting spaces that provided children with ample space to play and explore. Children made good use of the space available and played happily independently or cooperatively in groups. This helped them to build positive relationships with their peers and develop their social skills.

Children had access to resources that were accessible, in a good state of repair and well-organised, which encouraged exploration, enquiry and fun. The majority of children could access resources that took account of their age and stage of development. There was scope to further develop schematic and sensory play opportunities for younger children. This will support all children to experience high quality play and learning.

Children were happy and engaged in play whilst outdoors. The outdoor environment provided opportunities for risky, active and energetic play across three gardens. Children were curious and creative with loose parts and had fun as they explored the natural environment. Opportunities for free flow play meant the majority of children could make choices about where they wanted to play. Families provided positive feedback on the use of the outdoor space, comments included: 'The garden is always available to the children if they chose to go out. They are out in all weathers' and 'They [children] always have a choice to be outdoors and it's always the child choice whether to play outside or not'.

Infection prevention and control practices such as the use of personal protective equipment (PPE) and food safety practices supported children to stay safe. Older children were well-supported to wash their hands at key times, for example before mealtimes. However, we identified some infection prevention and control concerns on the first day of inspection. These related to ineffective hand hygiene for younger children and a lack of awareness regarding clutter and cleanliness in the younger children's play room. Staff had begun to take action to address this. There was an intrusive smell within the nappy changing room. This meant children experienced unpleasant nappy changing facilities (see area for improvement 1).

Children's privacy was protected by the safe storage of their information including electronic and paper files.

Areas for improvement

1. To support children's health and wellbeing, the service should ensure that effective infection prevention and control practices are in place for children.

This should include but not be limited to:

- ensuring effective hand washing routines are implemented and established for all children
- ensuring children experience an environment that is free from intrusive smells.

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) and 'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS 5.20)

How good is our leadership?

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 3.1: Quality assurance and improvements are led well

Children, families and staff benefitted from a committed leadership team. They promoted high aspirations for children through a shared vision. This created a happy and welcoming ethos in the service promoting a positive atmosphere for children to play and learn. The positive ethos meant staff were proactive in taking a shared responsibility for change and improvement. As a result, children benefitted from a staff team who were motivated and responsive to meeting their needs. One parent commented, 'We can't thank St. Andrews nursery enough. All members of staff (including reception and management) have always been supportive, polite, engaging and a pleasure to engage with. We feel our children are safe and well taken care of. The staff are knowledgeable, patient, kind and warm to all of the children'.

A range of effective systems was in place which supported a culture of continuous improvement. For example, the improvement plan that was realistic, achievable and measurable and supported positive outcomes for children. Staff were encouraged to be part of the service development, contribute ideas and reflect on their practice together. This had created a positive culture of self-evaluation for improvement.

A collaborative approach towards quality assurance was a priority for the leadership team. Most quality assurance processes ensured aspects of the service were being reviewed and monitored in a focused and meaningful way. However, quality assurance processes in a few aspects of practice, such as medication and infection prevention and control practices, were not yet robust. Children would benefit from these areas being reviewed to identify where changes can be made to ensure they consistently experience high quality care and support (see area for improvement 1).

The manager and staff fully engaged in the inspection process and appreciated the guidance and suggestions offered by the inspectors. The manager and staff demonstrated their commitment to the service and were motivated to make improvements to ensure positive outcomes for children.

Areas for improvement

1. To improve outcomes for children, effective and robust quality assurance processes should be implemented.

To do this the provider should, at a minimum, ensure:

- regular, effective and focused monitoring is carried out across the setting
- robust audits are developed and implemented, and any actions are addressed promptly.

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This is to ensure that 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

Children and families experienced a warm welcome as staff greeted them on arrival at nursery. Positive relationships with children and families supported effective and detailed handovers. This meant that important information was shared and supported positive transitions between home and nursery.

The deployment and levels of staff within the service were appropriate to ensure effective care and support for all children throughout the day. Staff were deployed in a way that enabled them to respond to children with care and attention. As a result, children benefitted from close attachments with staff. Children who required additional support were well-supported by staff to feel respected and included in daily experiences. This was enhanced through effective working relationships with families.

Staff were respectful and supportive of each other. This created a positive environment for children and families. There was a mixture of skills and experience amongst the team and there was an ethos of respect and professionalism across the wider team. Staff had undertaken training that had developed their skills, and the induction and mentoring systems helped staff understand the service and their responsibilities. This contributed to the care and support of children. One parent commented, 'The staff are not only good at their job but they are undeniably passionate about the children's welfare and positive upbringing'.

Staff across the service generally worked well as a team, communicating effectively with each other to ensure the service ran well and children's needs were met. Due to recent changes within the staffing structure, this was not yet consistent across all playrooms. The service had already identified this as an area for improvement.

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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