

Schools' Out! Day Care of Children

Netherlee Scout Hall
Ormonde Drive
Glasgow
G44 3RD

Telephone: 07940417762

Type of inspection:
Unannounced

Completed on:
27 January 2025

Service provided by:
Schools' Out!

Service provider number:
SP2003000797

Service no:
CS2003003906

About the service

Schools' Out! is registered to provide a day care of children service to a maximum of 140 children. It is based across two venues in Glasgow and provides an out of school care service, during term time, to children attending primary school.

At the time of the inspection, the service was providing care to under 40 children after school. Therefore, they were based only within the Netherlee Scout Hall. The breakfast club was provided to a maximum of 70 children before school and this is based within Netherlee Park Pavilion. At the time of this inspection, they were providing a service to a maximum of 20 children.

Netherlee Scout Hall is spacious with a large hall and two additional smaller rooms. There is a large enclosed natural outdoor space. 24 children were attending on the day of the inspection.

About the inspection

This was an unannounced inspection which took place on Thursday 23 January and Monday 27 January 2025. The inspection was carried out by one inspector 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, and observed, children using the service
- contacted families using Microsoft questionnaires to gather their views
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy and engaged. They were enjoying the range of activities available to them.
- There were good relationships within the service. Children had made friendships and enjoyed each other's company.
- Staff were kind, warm, friendly and caring.
- The provider should make progress on the areas for improvement.
- Procedures should be in place for ensuring personal plans are updated and all medical information is correct and relevant to the needs of the children.
- The provider should work with the landlord to maintain the quality of the environment for children.
- Time should be taken to ensure that quality assurance procedures are led well.

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?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

3 - Adequate

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

Quality indicator 1.1: Nurturing care and support

We evaluated this quality indicator as adequate, where strengths only just outweighed weaknesses.

Staff had built meaningful relationships with children and families using the service. There was an open and welcoming ethos within the service, and parents shared that they and their children were happy. Parents also told us that there were good open channels of communication, and that staff had formed positive relationships with their children. This enabled staff to develop positive attachments with the children which supported the children to feel secure, confident and respected.

Staff demonstrated that they had knowledge of the children's individual needs. There were personal plans in place that contained details about the children and their background. The service would benefit from streamlining plans to ensure they are an effective tool to use to gather the needs of children and plan for them individually based on the information gathered. This was an area for improvement from the last inspection. We have reworded the area for improvement (see area for improvement 1).

Children enjoyed the snack provided and they were being encouraged to plan and prepare their own snack on a rotational basis. They had access to fruit every day. The service should consider the best practice guidance, *Setting the Table*, in relation to menu planning for children. A designated space for children to sit down and eat their snack will enhance the snack experience. Staff had attended food and hygiene training. This meant that they followed best practice in relation to serving food.

Staff had participated in child protection training. They completed this as part of their ongoing professional development. There were plans in place for refresher training opportunities. Staff demonstrated that they were aware of their responsibilities and procedures in relation to child protection. There were key policies and procedures in place to keep children safe. We signposted the manager to best practice guidance in relation to keeping chronologies of significant events, linked to personal planning.

We reviewed medication in the service and found that there were procedures in place for the safe storage of medication. However, the service should consider reviewing the way that they communicate with parents regarding medication. Children should not be attending the service without clear procedures in place for administering medication (see area for improvement 2).

Quality indicator 1.3: Play and learning

We evaluated this quality indicator as good, where there were important strengths that clearly outweighed areas for improvement.

Children appeared confident and happy, and they were having fun at the service. When playing indoors children could choose to play with a range of table top games, drawing and construction. They spent time in small groups playing imaginative games and talking with friends. Children had lots of opportunities to lead their own play. The outdoor area had a large green space, bars for climbing and natural space and resources for digging and getting into nature. Children's experiences could be further enhanced by having

more staff in place to use the extensive outdoor area to its full potential. They would also benefit from having staff with good core skills in relation to offering nature based, natural outdoor play experiences as this was a particular interest of many of the children and would support children's health and wellbeing.

Staff planned activities daily based on discussions with children and current interests and themes. Children liked a range of crafts and some of the children had learned how to knit with staff. We saw that children were being consulted about snacks, activities and their play ideas. The records of these were not consistent or used effectively to influence the daily plan. The manager and staff team should continue to gather children's ideas and use these to influence the experiences on offer.

The staff team were nurturing in their approach. They responded to children's requests and needs. Staff celebrated children's achievements through sharing information with parents informally and discussions with children. There were some missed opportunities to extend and challenge children's play. The manager and provider should consider play based training that supports the staff practice to be more informed by the play principles.

Areas for improvement

1. Personal plans should be in place and be reflective of the individual children. They should be used as a tool to plan for meeting individual children's needs.

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).

2. The provider and manager should ensure that they follow best practice guidance in relation to storing and administering medication.

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) and "If I need help with medication, I am able to have as much control as possible" (HSCS 2.23).

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 service made use of the play spaces available to them across the building and garden. They also made use of the park in the morning for children attending breakfast club. Children played outside in the garden, this was a natural space with loose parts and access to a natural environment. The garden had recently been upgraded and there was access to a natural outdoor space.

The venue needed to be better maintained. There were plans in place to enhance spaces such as a quiet room and area for older children. The service should liaise with their landlord to ensure all areas are clean, free from clutter and in a good state of repair (see area for improvement 1).

Children could choose to play both indoors and outdoors, with easy free flow access to the garden. Children told us they liked playing mostly outdoors. However, this could not always be facilitated due to staffing levels. The deployment of staff should be considered to ensure more opportunities for an indoor outdoor experience can be facilitated to meet the needs of the children. We have also commented on this under Quality of staffing where we have made an area for improvement.

There was a range of play equipment and resources to cater for the needs and interests of the children. Staff were keen to give children opportunities for open ended play. For example, a set of cardboard boxes had given children lots of play opportunities and they were having fun and using their imagination.

Risk assessment procedures were in place. Staff undertook daily checks of the building and the outdoor areas. This helped support staff to show how they had identified and removed or reduced risks to children while attending the service.

More consideration could be given to providing exciting and challenging outdoor play experiences, allowing children opportunities to explore their natural environment. We signposted the service to the best practice guidance, My World Outdoors. As highlighted previously, upskilling staff in outdoor nature-based play will extend the opportunities for children.

Staff should consider developing the indoor environment to offer more challenge, spaces where children can rest and relax and offer a more welcoming and relaxing space where children can meet and spend time with friends. More consideration could be given to dividing the space for large physical play and quieter games. The space needs to be adaptable to meet the needs of the children.

Areas for improvement

1. The provider should ensure that the venue is in a good state of repair, clean and free from clutter to ensure that children have access to high quality facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.22).

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

There was a statement of vision, values and aims that highlighted the service's approach to nurture and play. This was shared with people using the service. We could see that they were inclusive and strived to meet the needs of individual children.

There had been no formal opportunities to take forward quality assurance. We saw that the team did communicate well and were thoughtful in the range of activities they planned for the children.

The children's views were considered through regular informal chats about their play. They were also invited to make suggestions using the suggestion box. The manager should take a more formal approach to improvement planning and self-evaluation. A quality monitoring calendar would support the manager and staff team to carry out quality assurance tasks throughout the year including audits, playroom practice monitoring and gathering of people's views. The information gathered from these tasks should be used to influence positive change.

A current improvement plan with clear rationale for change that is meaningful to the service would lead to continuous improvement. This was an area for improvement from the previous inspection that will continue. We have reworded the area for improvement (see area for improvement 1). We signposted the manager to the Care Inspectorate HUB bite size session for improvement planning and quality assurance calendars.

Areas for improvement

1. The provider should use a framework and develop systems for quality assurance that supports the staff team to assess, evaluate and improve the service. This should involve children and families.

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?

3 - Adequate

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

Quality indicator 4.3: Staff deployment

Staff worked well together as a team and were courteous and respectful with each other. The team were enthusiastic and committed to their role within the service and had brought a range of skills and knowledge to the team. The staff communicated effectively to support the changing needs of the children during the session. Staff had deployed themselves across the building to make themselves available for children. The staff were well-supported by the manager to take forward plans and activities.

The number of children attending the service had significantly reduced. This led to reduced staffing including the manager being counted within the ratio of staff to children. On busier days, the service had support from a student to cover the ratio of staff to children. The provider should ensure that as part of safer recruitment checks that students are registered with the appropriate regulatory body within the required timescales. Consideration should be given to the number of staff to support staff deployment and service improvement (see area for improvement 1).

Training opportunities for staff had been limited. Staff would benefit from further training and development opportunities based on the needs and interests of the children. This would support improvements within the service. For example, children had a keen interest in outdoor play. The garden had been refurbished to enhance the provision to give children the opportunity to play in a natural and fun outdoor space. Further staff training would give staff the right skills and knowledge to take forward.

Areas for improvement

1. The provider should ensure that they have enough qualified and competent staff employed within the service to ensure the safety and wellbeing of children. Staff should be registered with appropriate regulatory bodies within required timescales.

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) and "My care and support is consistent and stable because people work together well" (HSCS 3.19).

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

It is recommended that the service introduces a system to ensure that the children's care plan information is updated with families whenever there is a significant change and at least every six months to keep the service operating in line with the Public Services Reform (Scotland) Act 2010 and ensure children's safety.

National Care Standards Early Education and Childcare up to the age of 16: Standard 6 - Support and Development.

This area for improvement was made on 16 May 2017.

Action taken since then

The service had a registration form for children, this included information required to care for children. They should further develop this to ensure there are clear plans in place for meeting children's needs.

We have reworded this area for improvement, please see How good is our care, play and learning?

Previous area for improvement 2

It is recommended that the service find ways to extend the activities available to the older children to ensure that they are being challenged by the activities on offer and are able to learn new skills at the service.

National Care Standards Early Education and Childcare up to the age of 16: Standard 5 - Quality of Experience.

This area for improvement was made on 16 May 2017.

Action taken since then

The older group of children were happy with the activities provided and enjoyed making up their own games and relaxing with friends. Children had access to open ended play and had a choice in what they wanted to do and lead their own play.

This area for improvement has been met.

Previous area for improvement 3

It is recommended that the service updates policies and practice to ensure that staff files evidence safer recruitment checks and staff registration status with the Scottish Social Services Council (SSSC).

Consideration could be given to introducing a tracker to files to support this process which could include dates which checks are sent/completed and any comments about action taken to help ensure children's safety.

National Care Standards Early Education and Childcare up to the age of 16: Standard 12 - Confidence in Staff.

This area for improvement was made on 16 May 2017.

Action taken since then

The provider should ensure that all staff that are counted within the ratios of staff to children are registered with the correct regulatory body.

We have reworded this area for improvement, please see How good is our staff team?

Previous area for improvement 4

We recommend that the service further develops quality assurance systems to have clear priorities which are focussed on outcomes for children. This could include:

- a monitoring calendar, linked to routine monitoring and service priorities
- use of aspects of How good is our early learning and childcare? to evaluate the service against national standards (<https://education.gov.scot/improvement/Pages/frwk1hgioearlyyears.aspx>)
- use of various observation types to monitor practice
- delegated monitoring tasks to engage staff in monitoring and evaluation
- best practice discussion groups with a clear focus on set priorities
- involvement of children and families in evaluating the service
- recognition of staff's key strengths and areas of interest to develop the service

Referring to websites such as the Care Inspectorate Hub (<http://hub.careinspectorate.com/>) and Education Scotland's National Improvement Hub (<https://education.gov.scot/improvement>) will also support the service to see recent examples of guidance in practice.

National Care Standards Early Education and Childcare up to the age of 16: Standard 14 - Well-Managed Service.

This area for improvement was made on 16 May 2017.

Action taken since then

The service had not taken action on developing systems for monitoring and evaluating.

We have reworded this area for improvement, please see How good is our leadership?

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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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