

# Dingwall (English) Nursery Day Care of Children

Dingwall Primary School, , Ross Avenue, , Dingwall, IV15 9UU Ross Avenue Dingwall IV15 9UU

Telephone: 01349 862 081

**Type of inspection:** Unannounced

**Completed on:** 30 January 2025

Service provided by: Highland Council

**Service no:** CS2003013583 Service provider number: SP2003001693



## About the service

Dingwall (English) Nursery is situated in the grounds of Dingwall Primary School within the town of Dingwall in the Ross and Cromarty area of Highland. The nursery is situated in a stand alone building. The nursery has four indoor playrooms which all open onto a shared, enclosed outdoor play area. The nursery has its own entrance, kitchen facilities in each room, toilets, two designated nappy changing spaces and an office space.

The nursery is registered to provide a day care of children's service to a maximum of 80 children aged from 3 years to those not yet attending primary school. The service operates Monday to Friday during term time and is provided by the Highland Council.

## About the inspection

This was an unannounced inspection which took place on 29 January 2025 between 08:45 and 17:45 and 30 January 2025 between 08:30 and 12:15. 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 children using the service and five of their families;
- spoke with staff and management;
- · reviewed online questionnaire feedback from nine families;
- reviewed online questionnaire feedback from four staff;
- · observed practice and children's experiences; and
- reviewed documents.

## Key messages

- Children were happy and confident within the service and were cared for by staff who were warm, kind and nurturing in their approach.
- Children benefited from play experiences which nurtured their curiosity and were responsive to their interests.
- Children had access to resources that encouraged exploration, enquiry and fun.
- Families reported positively on their experience of using the service.
- Children experienced daily opportunities for outdoor play which supported them to be active and healthy.
- Quality assurance systems should be developed further.
- Staff deployment arrangements did not always meet the needs of 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?	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? 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 were happy and confident within the service. They were cared for by staff who were warm, kind and nurturing in their approach. Staff knew children well and were attentive to their needs, offering cuddles and reassurance throughout the day to support their wellbeing. This helped children to feel safe and secure. When children were supported with personal care, interactions were sensitive and caring which nurtured children's security and confidence.

We saw children and families being warmly welcomed into the service. Staff took time to talk with them and inform them about their child's day. This supported positive relationships and helped families to feel part of the service. Families spoke positively about relationships with staff, telling us, "Staff are amazing, very helpful, always very polite when I come to collect or drop off my child. Very positive energy and I recognise such a positive impact on my child since he started Dingwall Primary ELC." and "The staff are very approachable and chat to us about our child every day.".

Children's overall wellbeing was promoted through effective personal planning. This was carried out in collaboration with families and partners to promote consistency and continuity in care. One parent commented: "I feel comfortable to speak to staff if I have any concerns or queries with my child's learning and they will also approach me if they need to discuss any changes.". Personal planning information contained relevant information and strategies which were used by staff to support the development needs of children. Most staff spoke confidently and knowledgeably about the care needs of children and implemented strategies to support them. As a result, children received well-planned care and support to meet their individual needs.

As part of their ongoing development work, the service had used best practice guidance to develop and improve the snack and lunchtime experiences for children. During snack, children had opportunities to prepare food, pour their own drinks and clear their own plates. This supported them to be responsible and develop their independence skills. The manager had identified that the next step for extending children's responsibility at this time, was for staff to consistently encourage children to serve their own snack items.

The lunchtime experience for nursery children within the school canteen was a relaxed, unhurried and sociable time for children. There were a number of nurturing touches in place such as relaxing music, flowers on the table, dishes to self-serve meal accompaniments and napkin baskets. All of which helped to create a calm and homely atmosphere. Staff sat with children which provided opportunities for nurturing conversations and to build attachments. As a result, children benefited from positive mealtime experiences.

A smaller group of children attended a 'lunch club' within the nursery playroom. There were missed opportunities to support children to develop their independence during this time. These children did not consistently receive the necessary support to provide a relaxed and nurturing experience. The leadership team advised that they had planned changes to support improvements in this area. The leadership team should monitor any changes implemented to ensure a positive impact on outcomes for children.

There were some inconsistencies in the systems for managing the safe administration of medicine. For example, we identified some gaps in paperwork for children related to the administration of their medication. This had the potential to lead to their medical needs not being met. During the course of the inspection, the management team took proactive steps to address these gaps (see area for improvement 1 in 3.1).

Staff worked in partnership with outside professionals to improve outcomes for children when they needed additional help. Appropriate strategies had been identified and put in place to support children, for example with developing social skills and independence. As a result, children were supported to reach their potential.

The management and staff team were knowledgeable about the potential impacts on children of poverty and adverse childhood experiences. The service had developed a family centre which offered a range of supports to families. These included drop in sessions, access to resources such as nappies, clothing, toys and books and links to other support services such as Mikey's Line and Women's Aid. This resource strengthened children and family resilience and the partnerships between the service, families and the wider community.

#### Quality indicator 1.3: Play and learning

Children were meaningfully and actively involved in leading their own play and learning through a balance of spontaneous and planned experiences which were fun and interesting and offered opportunities for children to investigate and be creative. When they were able to, staff followed children's lead within play and were responsive to their interests. For example, children enjoyed exploring sounds with musical instruments. Some staff sensitively supported this interest by helping them to perform simple rhythms and celebrated their sound making actions. This encouraged the children to experiment and experience fun as they played.

Further play and learning experiences provided children with opportunities to develop their literacy, language and numeracy skills. Staff shared stories with children at times throughout the day. There were opportunities for purposeful mark making across play areas indoors, as well as resources to support the development of children's pre-writing skills through activities such as arts and crafts and painting. Some older children interested in mark making and exploring letter formations were provided with resources and encouragement to develop their pre-writing skills through play. Counting was reinforced with children throughout day to day routines such as snack and lunch time. Some children we spoke with could confidently use language related to measure to describe and compare heights. They said: "I'll be taller than my Dad", "I'm growing all the time" and "XXXX is the tallest!". As a result, children were supported to develop key language, literacy and numeracy skills through their play experiences.

There were times when children experienced good quality interactions from staff where they used effective questioning to extend children's thinking and build on their interests. However, due to competing demands on their time, there were also opportunities to scaffold learning for children which were missed. This did not always support children to have high quality play and learning experiences.

Planning approaches within the service were child centred and responsive to the children's interests and life experiences. Staff used floorbooks and responsive planning sheets to plan and record children's learning. Children's comments, ideas and learning were evidenced within these, which demonstrated their voice was included within the planning process. Recent interests in 'Australia' and 'Bears' had been taken forward within some of the play spaces and this was clearly reflected in the resources and experiences available for children.

Observations of children's learning were shared with families through an online platform, learning journey folder and more informally during drop off and pick up times. Some families commented on the positive progress their child had made whilst attending the service: "Since he has started there in August 2024 his speech has came on incredibly. He comes home from nursery a lot more happier and calmer." and "His speech is coming along so much better since being at nursery and he listens to instructions more now.". From the observations sampled, there were some good examples of learning in children's profiles. However, this was not consistent across the staff team. The service had identified the need to support and develop staff confidence in observation, planning and assessment approaches to ensure all children are supported and challenged at an appropriate level.

Children's opportunities for play and learning were enhanced through links with the local community. Visits to the local woodland and nearby Tulloch Castle supported children to understand more about their local community. Links with the local library service provided opportunities for children to share books and take part in Bookbug sessions. As well as this, Artsplay Highland and recent music sessions provided further opportunities for children to be creative and learn new skills.

## 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 four indoor playrooms were spaces which were furnished well with plenty of natural light and ventilation. Staff had worked to add homely touches to areas such as cosy spaces to rest and relax and some natural planting. Staff identified that developing and extending this further and more consistently across playrooms was a focus for development. Children could move around the play spaces freely which gave them choice in where they wanted to play and ample space to meet their needs.

The indoor environments were structured to take account of the varying stages of children's development and learning and children had access to resources that encouraged exploration, enquiry and fun. The continuous provision indoors had been considered to include a selection of open ended and natural resources, enabling children to explore opportunities which promoted their curiosity and imagination. We observed children following their own interests in the 'Kinnairdie café' as they prepared food items, served their friends and wrote down their menu choices. Children's individual interests had also been considered within the environment with one child's interest in hoovers reflected within their play choices. This supported children to feel engaged and included in the nursery space. The service had identified the need to further develop consistency around quality of resources across all indoor playrooms and were in the process of purchasing resources to support this.

Children benefited from free-flow play between the indoor and outdoor area. This enabled children to have choice, direct their own play and supported them to be active and healthy. In the outside space there were opportunities for children to take part in more physical play experiences. Areas to scoot, run and explore provided opportunities for children to have fun and develop their movement and coordination skills.

There were some infection prevention and control procedures which supported a safe environment for the children and staff. The environment was generally clean and staff washed their hands at appropriate times throughout the day. However, some infection control practice needed improvement. Children were not always supported to wash their hands at appropriate times, for example after snack or after taking part in outdoor play. As well as this, one of the nappy changing areas was not suitably cleaned. This had the potential to increase the risk of cross contamination and the spread of infection (see area for improvement 1).

#### Areas for improvement

1. To keep children safe and healthy and to promote their wellbeing, the provider should ensure effective infection prevention and control practices are in place. This includes but is not limited to:

a) ensuring that correct hand washing routines are established and maintained, according to infection prevention and control guidance; and

b) nappy changing areas are clean and hygienic.

This is to ensure that infection prevention and control practices are consistent with the Public Health Scotland document: Health protection in children and young people settings, including education.

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).

#### 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 management team were in the process of reviewing their vision, values and aims to reflect the aspirations of their current children, families, partners and wider community. This review had started to be implemented to help the service identify, and understand more fully, what is important for children and their families as the service moves forward.

The views of families were actively sought to support the development of the service. Through question boards, discussions during stay and play sessions and informally at pick up and drop off times, families have had the opportunity to feedback ideas for change. This had resulted in changes to the opening times of the service as well as the format children's learning profiles were shared. As a result, families could access the service at times which better met their needs and had more opportunities to contribute to and find out about their children's learning. Families also had opportunities to join transition visits with their children and the family centre provided events such as coffee mornings, baby groups and sessions to support the development of play experiences with children. Most families who responded to our survey strongly agreed or agreed with the statement: 'My child and I are involved in a meaningful way to help develop this setting

and our ideas and suggestions are used to influence change'. Some parents commented: "We are asked about the aims and value of the nursery and if there is anything we would add or change." and "'Stay and Play' sessions are offered to experience the setting and offer any ideas or feedback. I feel staff are really approachable and would listen to any suggestions.". We found this promoted inclusion and allowed families regular opportunities to be involved and contribute towards change within the nursery.

Quality assurance systems were in place which were supporting monitoring in most aspects of service delivery such as the learning environment, planning approaches as well as tracking the individual experiences of children. Staff had been given constructive feedback from monitoring to improve their confidence planning children's learning and develop the quality of observations. There was an improvement plan in place which had meaningful and realistic priorities that included developing the learning environment, planning, profiling and supporting changes within staffing. However, quality assurance processes were not covering all aspects of the service. For example, issues with the management of medication and infection prevention and control practices which had not been identified or addressed (see area for improvement 1).

Regular staff meetings and visits to nursery from the management team were supporting effective selfevaluation in most aspects of service delivery. The staff team were supported to develop their skills and knowledge and training had begun to be implemented to support the current development priorities for the service. Some staff commented that recent training to develop observation and planning approaches was helping them to plan more meaningful learning experiences related to children's interests and developmental stages. Staff had opportunities to look outwards and had taken part in peer moderation activities with other services. This had resulted in improvements to planning approaches and gathering of quality observations of children's learning.

#### Areas for improvement

1. To support the effective development of the service and improve children's experiences, the provider should ensure effective quality assurance processes are implemented that cover all aspects of the service.

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

The staff were caring and nurturing and committed to providing a positive experience for all children. They were warm and friendly in their approach which promoted a happy and inclusive environment where children could play and have fun. Families commented: "Staff are always friendly, approachable and informative.", "The staff are brilliant, always very lovely and approachable. Communication always amazing! Involve me in everything about my child." and "All the ladies are fantastic and my daughter is well looked after and has a lot of fun". Almost all families strongly agreed or agreed with the statement: "I have a strong connection with the staff caring for my child'. This helped to foster positive relationships between

the staff, children and their families.

Most of the staff team communicated well with each other when a task took them away from their designated area. They informed each other when leaving an area or when attending to a child's needs. Regular headcounts were undertaken when transitioning between spaces at lunchtime which supported children's safety. The management team had identified the need to develop more effective systems to monitor the whereabouts of children throughout the day as they moved between indoor and outdoor spaces and were taking steps to address this.

Arrangements for unplanned absence were supported by effective systems to ensure children's needs were met. For example, the service tried to use members of school staff known to the children for supply work to ensure consistency in care and minimise disruption to children's routines. Clear personal plans and other key information was available to all staff. This ensured that staff working in the service understood the needs of individual children and how to support them.

Although the minimum adult to child ratio was met, the deployment and number of staff working in the service were insufficient to meet children's needs. The approach to staffing in the service did not take into account the complexity of individual children's needs and the layout of the four playrooms and outdoor space. For example, free-flow play was facilitated for most of the day. However, this was often difficult to facilitate as well as support play and learning experiences in four other indoor areas. As a result, play and learning experiences were not always being maximised to ensure children's individual development needs were supported. This resulted in missed opportunities to support children to reach their potential (see area for improvement 1).

#### Areas for improvement

1. To ensure children's care and support needs are met and they receive high quality experiences, the provider should ensure there are sufficient staff deployed effectively, taking account of children's care and support needs and the layout of the service.

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

'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17); and 'My needs are met by the right number of people.' (HSCS 3.15).

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 enable intimate care to be carried out in a dignified way the provider should review and improve the current nappy changing space to support children's privacy and dignity to be respected.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected. (HSCS 1.4)

This is also consistent with standards set out in the Care Inspectorate document 'Nappy changing facilities for early learning and childcare services: information to support improvement' (2018).

#### This area for improvement was made on 3 November 2017.

#### Action taken since then

Since the last inspection the service has undergone significant refurbishment to include the addition of two designated nappy changing spaces. As a result, children now have access to facilities which support their dignity and privacy to be respected.

Therefore 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?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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