

# Forthview Out of School Provision Day Care of Children

Forthview Primary School West Pilton Place Edinburgh EH4 4DF

Telephone: 01313 328 424

Type of inspection:

Unannounced

Completed on:

25 February 2025

Service provided by:

North Edinburgh Childcare

Service provider number:

SP2003003092

**Service no:** CS2003048328



# Inspection report

## About the service

Forthview Out of School Provision Club is registered to provide a care service to a maximum of 60 children any one time from entry into primary one and entry into second year of high school.

The manager is also the manager of Pirniehall and St David's Out Of School Provision CS2003048347.

Delivered from Forthview Primary School, the service is close to local transport links and amenities. The dining hall is allocated to the service by the school with regular use of the gym hall and school playground.

## About the inspection

This was an unannounced inspection which took place on Thursday 20 February 2025 between 14:15 and 17:40, and Friday 21 February between 12:00 and 16:00. 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 children using the service
- received feedback from six families
- spoke with staff and management
- observed practice and children's experiences
- · reviewed documents.

# Key messages

- Children experienced warm, nurturing interactions from staff who knew them well.
- Children had fun throughout the session and actively led their own play and learning.
- There was scope to involve children and families in a more meaningful way to influence positive change within the service.
- Staff had established strong working relationships and had created a positive ethos, which promoted a supportive environment for children and their families.

## 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

Children experienced warm, nurturing interactions from staff who knew them well. They were having fun, and we could see that clear friendships had been formed. Staff responded to children's needs and requests, were attentive and offered comfort and support. This meant children felt respected and valued. All parents who responded to our online survey told us they were happy with the care and support their children received. One parent told us their child was "building fantastic friendships and bonds with lovely staff".

Staff supported children's health, care and wellbeing needs through personal plans. These had been developed with children and their families and contained clear information about their current needs, preferences and interests. This included where children had allergies or other medical needs. We discussed with staff that plans should contain more detail to support children's development and progression. This would ensure children were getting the care that was right for them to reach their full potential.

Children's medical needs were supported by the safe storage of medication. Medication was generally being managed to support children when needed and required medications were present and had documentation to guide staff. However effective monitoring should ensure that the recording of strength and dosage of medication is in line with the prescription. This is important to keep children safe and healthy (see area for improvement 1 in key question 3: 'How good is our leadership.').

Staff understood their role and responsibilities in keeping children safe. They had completed child protection training and demonstrated a good understanding of the processes and procedures they would follow if they had any concerns about children's wellbeing.

Children experienced snack times that were sociable, relaxed, and unhurried. They enjoyed sitting with friends to eat and discuss their day. Staff sat alongside children and engaged in meaningful conversations which enabled children's social development. Children were consulted about what types of snacks they would like, and their choices were included in the weekly snack menu. Children were encouraged to develop new skills as they collected their plates and self-served their food. This gave them a sense of responsibility and ownership of routine. At times children returned for fruit which was available throughout the session, and walked around the room eating. Staff should remind children to sit at the table while eating to ensure their safety.

#### Quality Indicator 1.3: Play and learning

Children had fun throughout the session and benefitted from a range of play experiences that provided a balance of spontaneous and planned opportunities. They were actively leading their own play and learning and engaged with resources for sustained periods which supported their interests. These included Lego, art and crafts and small world toys. Children told us they enjoyed the club, and one child told us "It's fun, lots to do and the staff are fun".

Staff showed enthusiasm in their interactions with children and showed their play experiences and ideas were valued. Children were supported to follow their interests and staff were responsive to their requests. For example additional resources were provided for bracelet making.

Children's literacy and numeracy skills were supported by staff who used opportunities to follow children's interests in literacy and numeracy. Individual reading and small group reading was available. Further opportunities included conversations and discussions with staff, for example, we saw discussions around the workings of watches and how an art activity could involve animals and making a "hippo".

Children's achievements were valued and artwork was displayed daily to share with families. Staff based planning on children's interests however this could be further developed such as involving children in evaluating activities. We discussed ways to capture children's experiences and voices to inform and support further planning.

## 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 experienced a bright clean and welcoming setting. As well as the dining hall, children had regular access to the gym hall and school playground. Play spaces reflected children's interests and provided a range of opportunities for active play and learning. Staff had identified children needed a dedicated space for coats and bags and were exploring ways to provide this.

The setting and equipment were safe, secure, and well-maintained. Good communication between staff meant that children were always accounted for. They had effective systems in place for signing children in and out of the setting and ensure that children were collected by an appropriate adult. Risk assessments and checks taken by staff helped to ensure a safe environment for children. Staff carried out daily checks of all spaces to ensure any potential risks were identified and actions taken to remove these. This meant spaces were safe for children to play and explore.

Children were supported to be healthy and safe through effective infection prevention and control routines. Staff had implemented appropriate measures to keep children safe and healthy. For example, children were encouraged to wash their hands, and tables were cleaned after children had finished their snack. The playroom was visibly clean, and staff reported maintenance issues quickly to ensure the premises were well-maintained.

Resources were easily accessible to children and the layout of the playroom provided a variety of areas to enjoy different types of play with space for floor play and use of tables. This resulted in children having the opportunity to make choices about how they spend their time. Children had the opportunity to relax, enjoy books and self-regulate in a quiet area set up as a cosy corner. They engaged for sustained periods at their chosen activities and particularly enjoyed art and craft and drawing activities.

Children had access to the school playground. This provided opportunities for energetic and physical play which benefitted their wellbeing. We saw children enjoying playing football and taking part in a scavenger hunt. Staff encouraged friendship groups as they played which helped to support children's confidence and

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give them a sense of belonging. The outside space was monitored by staff and children were familiar with where they could play. Staff undertook daily checks of the outdoor areas. This helped support staff identify and remove or reduce risks to children while attending the service.

Information about children was kept securely. Sensitive information was only shared with those who needed it to meet children's needs. As a result, children's information was protected, and storage complied with relevant best practice.

## 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 engaged well with the inspection process and had a positive outlook on change and improvement. As a result, there was a positive ethos in the service. Staff told us they felt supported and valued by the manager.

Parents were kept informed about the service through regular newsletters and an information board was displayed for parents during pick up times. Most families told us communication was good and that they always received information, however some parents felt this could be improved. We discussed communication methods with staff to ensure parents were kept abreast of changes within the service, for example changes in the staff team.

Children and their families' views and ideas were valued by the service and used to inform improvements. For example, a sign out form had been introduced for parents and an activities planning board displayed in response to their feedback. This change was shared with parents to show them that their opinions mattered. Children were being included in planning some aspects of their experiences, for example, the snack menus and the play experiences on offer. There were also opportunities to broaden the range of ways staff consulted children on their views to capture the ideas of all children to influence change.

Quality assurance processes were in place and were supporting positive outcomes. This involved the key priorities of the improvement plan which included self-evaluation, planning and staff training. Improvement should continue to focus on auditing and monitoring areas where gaps were found. For example, audits of management of medication in line with guidance (see area for improvement 1).

Team meetings took place regularly and these provided opportunities for staff to discuss a range of topics, including sharing information about children and areas for development within the service. Following training, staff were encouraged to reflect on how new learning would influence their practice. This would help to ensure that new skills and knowledge became embedded in practice in a meaningful way.

#### Areas for improvement

1. To meet children's care and learning needs, management should audit and monitor the management of medication in line with guidance.

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'.

# 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 worked well together to create a warm and welcoming environment. They had established strong working relationships and had created a positive ethos, which promoted a supportive environment for children and their families. They were respectful in their interactions and caring in their approach. Parents were positive of their relationships with staff and comments included "nice friendly and caring staff".

As a small team effective arrangements were in place in the event of absence, with familiar and consistent relief staff providing support. This meant that children and families experienced continuity of care which helped to develop positive relationships. Staff told us they enjoyed working at the service and felt valued in their roles.

Staff communicated well with each other which ensured that children's safety was maintained. They were flexible in their approach to follow children's interests and requests in play. Clear roles and responsibilities were assigned to staff, for example, one staff member oversaw the entrance area, so children felt welcomed on their arrival and they were recorded on the register for safety. Other staff were engaged with the children at play. Staff were spread across the different spaces, which meant that children had a choice of where they wanted to spend their time.

Staff had a good mix of skills, knowledge and experience to meet children's needs. We would encourage the team to continue to develop their knowledge, skills, and practice by using best practice guidance and frameworks to support positive outcomes for children.

# 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
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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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