

Airyhall Out of School Club Day Care of Children

Countesswells Road Aberdeen AB15 8AD

Telephone: 07525 855 355

Type of inspection:

Unannounced

Completed on:

28 March 2025

Service provided by:

CLICC Ltd.

Service provider number:

SP2003003228

Service no: CS2009194457



About the service

Airyhall Out of School Club is a day care of children service provided by Community Link Childcare (CLICC). They are registered to provide care to a maximum of 80 school age children. The care service operates between 7:30am to 9:00am and 2:45pm and 6:00pm Monday to Friday during the term time and between 8:00am and 6:00pm during school holidays and in-service days. During the operating times the service will have exclusive use of the dining room, gym hall, toilets and outdoor play areas.

The service is delivered from Airyhall Primary School in a residential area of Aberdeen. Children were looked after mainly in the school dining hall from where they had direct access to the large outdoor area. There were up to 47 children present during our inspection visits.

About the inspection

This was an unannounced inspection which took place on 26 April 2025 between the times of 15:15 and 18:10 and 27 April between the times of 13:30 and 17:10. 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 and complaint 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 three of their parents/carers
- received 15 completed questionnaires from parents/carers and staff
- spoke with staff and management
- · observed practice and children's experiences
- · reviewed documents.

Key messages

- Good relationships had been formed between children and staff meaning children were happy and well settled.
- Children were leading their own play, choosing where and how they wanted to spend their time.
- Manager and staff should consider how to consistently record and celebrate children's successes and achievements,
- Children were benefitting from improvements to the service as the manager and staff were keen to develop the service they delivered.
- Children benefitted from a staff team with a balance of skills and experience which they used to provide positive experience for children.
- The manager and staff should continue with plans to further promote parental engagement and communication.

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's wellbeing and confidence were supported through nurturing and caring interactions with staff. Children were encouraged to participate, given reassurance when necessary and praised for their achievements. Most parents told us they felt there was a strong connection to staff caring for their children. One commented, "Everyone really friendly, nice, can't fault them, my kids like everyone" and another said, "The staff are always friendly and welcoming". However, a few parents felt that they did not know the staff caring for their child. The manager agreed to review how parents are encouraged to engage with the service and get to know the staff.

Children were happy and relaxed, confidently speaking about their experiences. For example, telling us how they knew what snack foods were healthy choices and showing us the displays they had made for this. Children's dignity was supported through interactions with staff while supporting children in personal care routines such as handwashing or in resolving any disputes. Children's independence was supported through newly introduced children's job roles. This meant that children had opportunities to carry out tasks they felt were important for each other's wellbeing. For example, ensuring fresh drinking water was available throughout each session.

Children had snack on arrival at the club. This was a sociable experience allowing them opportunities to build relationships with staff and peers. Children's health was promoted as food offered was in line with current nutritional guidance. Children had influenced the menu planning, supporting their awareness of healthy choices. Staff prepared and served the food for children. Creating more opportunities for children to be involved in the serving and preparation of food would promote their engagement. It would also allow staff to provide further social opportunities for children. Children's health was promoted by staff awareness of allergies and intolerances. Procedures were in place to limit the risk of cross contamination of any allergens.

Children's wellbeing was supported as information was gathered to enable staff to identify individual needs and support that may be needed. The information was recorded within different forms depending on the child's needs and process in place when they joined the service. This information was regularly reviewed with parents meaning that it was relevant and up to date. For one of the records that we sampled, the information was not consistent across all the forms used for that child. We asked the manager to consider how best to ensure that the quality of information was consistent. This will ensure that staff access the most recent and up to date information. Children's health was promoted by the procedures in place for the safe storage and administration of medication should it be required.

Positive links had been formed with the school and any other agencies involved in children's care. This supported a continuity of approach and accurate information sharing, promoting positive outcomes for children. Children were kept safe as staff had a good understanding of their role in safeguarding children. This included identifying, recording and referring any concerns they may have.

Quality Indicator 1.3 - Play and learning

Children were confident in the routines of the day and in accessing the different areas, resources and activities offered. Most of their play was spontaneous with core activities, such as the reading area, drawing area and outdoor games, available every day. Staff had planned activities to encourage children to experiment and problem solve. They were building on this to offer these opportunities every day and should continue with this.

There were a number of opportunities for children to develop their skills in language and literacy including discussions, reading and display making. One child was very proud to show us a book they had made with a peer. There were fewer opportunities for children to develop skills in numeracy and this area should be further developed. For example, interactions and resources to support numeracy conversation and challenge. For example, counting spaces on board and numbers on dice when playing games or measuring resources when relevant during certain activities.

Staff were responsive to children's interests and this was reflected in the planned activities. Children were encouraged to express their interests and choices and supported in accessing relevant resources. While staff interactions were kind and supportive they did not consistently support children to expand their learning. There were missed opportunities to support children to consider and problem solve through using questions such as what if, and what do you think would happen. However, staff showed genuine interest in the children and were enthusiastic about participating in and supporting their play activities.

For some children there were records of interests and achievements as well as child led goals and targets for learning or experiences. This was not yet consistent for all children. Plans were in place to implement a new format to support a consistent approach to gathering information on what children wanted to achieve. Fully implementing this alongside recording and sharing achievements will support staff in promoting positive experiences for children. This will positively impact on children's confidence and sense of value.

Children who attended full days during the holidays and in-service days benefitted from using parks and other spaces in the local community. We asked the manager to consider ways to overcome the challenges in providing these links to children attending before or after school. For example, asking people from the community to come and share experiences.

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 service was delivered primarily from the school dining hall. Children's wellbeing was promoted as the room was bright and airy with plenty of space for their play. There were some soft furnishings such as bean bags, rugs and cushions used to support children's comfort and promote a homely atmosphere. In certain places though there were not enough of these. For example, the reading area was well used by children, but there were not enough cushions or space on the rug in this area. We asked the manager to consider how they could expand the comfortable spaces available to children. Good use was made of children's artwork in displays to promote their confidence and sense of belonging. These display boards were then used to

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arrange the room into zones, supporting children to have access to quieter areas and promote their engagement in the activities offered.

During the inspection children had free access to the outdoor area, a few parents mentioned that at times this can be restricted. One commented, "The older children especially benefit from outdoor play. This should be an all-weather option as it can be restricted". It is important that children can access the outdoor area daily, when it is safe to do so, in order to promote their health and wellbeing.

Children's safety was promoted as resources they were accessing were well cared for and appropriate for their stage of development. Children had been involved in making decisions about the resources to be purchased. This meant they felt involved and listened to. The manager had identified that more challenging resources were needed, in particular for older or more able children. We suggested that including more loose parts type materials would promote opportunities for experimenting and problem-solving.

The building was safe, with a secure entry system and enclosed outdoor play areas. As part of the local primary school, it was well maintained. Risk assessments had taken place to consider any hazards and how the risks presented could be minimised. Children had been involved in some of these assessments. This involvement will have supported their awareness and management of risk and should be continued and expanded.

Procedures for infection prevention and control (IPC) were in place and promoting children's health. This included regular cleaning of surfaces and handwashing by staff and children at appropriate times. Staff wore aprons and gloves (PPE) when preparing and serving snack, to further promote IPC. However, on occasions they moved away then returned to the task without changing their gloves or apron. We referred the manager to best practice guidance and asked that they ensure this is being consistently adhered to.

The privacy and confidentiality of children and their families was supported by the safe storage of their information. This included password protection for any digitally held records.

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 provider's statement of aims and objectives was displayed to help parents and other stakeholders know what to expect from the service. While this broadly reflected the practice we observed it had not been recently reviewed. We suggested that involving parents and children in any reviews of this document would promote engagement and an awareness of what was important to meet the needs of children.

Most parents agreed that they and their children were involved in developing the service and gave examples of how this happened. One commented, "Suggestions and feedback are encouraged through emails, newsletters and parent suggestions - there is always a parent input sheet next to the children's sign out sheet". Recently children had been encouraged to form a committee as "ambassadors" to encourage their input on decisions such as resources, activities and snack menus. Some of their ideas had already been implemented, encouraging children to feel listened to and valued.

Staff told us they felt involved in the evaluation and development of the service. They were able to tell us

how they had individually implemented or initiated change. They shared how they had worked collaboratively towards some improvement goals as well as how they had individually implemented or initiated change. An example was involving older children in regular science experiments to promote their interests and provide challenge. Staff were keen to involve children in identifying further improvements. However, they were less confident when discussing planned improvements and their role in these changes.

Self-evaluation as well as quality assurance processes were in place and had identified areas for development such as children's involvement and parental engagement. However, some of the audits had not identified things that we noted during our inspection. For example, the incorrect use of PPE during snack. We asked the manager to ensure that audits are effective in identifying any issues going forward.

Improvements were planned well with actions and timescales to promote the pace of change. We asked the manager to ensure that changes were evaluated. This will them ensuring that the development of the service has a positive impact on children's outcomes and experiences.

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

Children benefitted as there were enough staff to meet their individual needs and keep them safe. Staff had a range of experiences and skills and told us that they felt they worked to each other's strengths. For example, leading activities which interested them meant that children benefitted from their knowledge. Staff were all enthusiastic about caring for the children and had time to participate in their play and discussions.

Children were greeted warmly by staff on arrival at the club, supporting their transition from school. When parents arrived to collect their child, they were invited into the club. Staff greeted parents on entering the room but once there, the quality of interactions and information sharing was not consistent. Some parents were given lots of detail about their child's experiences and others less so. Other means of communication were used to inform parents of the club's activities and remind them of upcoming holidays and events. This included emails, newsletters and social media posts. Most parents told us they were happy with the communication and they felt welcomed and able to discuss their child with staff. Parents told us that if they asked any questions, they were given prompt and informative responses. One commented, "Feel I could stop the staff and ask anything and they would do their best to answer/help". Parental engagement had been identified for development and the manager and staff were looking at ways to continue to build relationships with parents.

Staff knew the children and had formed positive relationships with them. They were able to discuss children's personalities and interests. This knowledge supported their interactions with children and encouraged them to feel involved. These relationships were promoted by the use of consistent relief staff to cover any absences.

Children were kept safe as staff were proactive and communicated well if tasks took them away from the children. Walkie talkies were used to aid communication between outdoors and indoors. This meant staff had a good awareness of where children were and when they may need extra support. Staff were clear in

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their roles, supporting them to be prepared for the activities and able to promote positive experiences for children.

There were opportunities at the beginning and end of each session for staff to share experiences, promoting a consistent approach. New staff members completed an induction process and were mentored by colleagues. They told us this helped them feel confident in their roles and able to support children appropriately.

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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