

## Spring Oscars @ Blackhall Day Care of Children

Blackhall Primary School  
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**Type of inspection:**  
Unannounced

**Completed on:**  
28 February 2025

**Service provided by:**  
Out of School Scotland Limited

**Service provider number:**  
SP2007009266

**Service no:**  
CS2010279822

## About the service

Spring Oscars @ Blackhall is registered to provide an early learning and childcare service to a maximum of 60 children at any one time of primary school age. The care service can be provided to a maximum of 80 children aged from entry to primary one to age 14 years during the school summer holiday period. Within this number care can be provided to a maximum of 10 children who are registered to start school in the August of that year.

The services operates after school hours and provides a morning breakfast club. The service has sole use of one room in a prefabricated standalone building within the school grounds of Blackhall Primary School. The service also has use of a large gym hall. Older children are usually based in the gym hall and younger children use the standalone building.

## About the inspection

This was an unannounced inspection which took place on Wednesday 26 February 2025 between 15:15 and 18:00. We returned to the service on Thursday 27 February 2025 between 08:00 and 09:50 and 14:25 and 17:50. 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 and two parents onsite
  - received written feedback from 10 parents via an online survey
  - spoke with staff and management
  - observed practice and children's experiences
- reviewed documents.

## Key messages

Children were happy and having fun.

Children's play and learning was promoted through a range of experiences and resources.

Effective staff deployment supported children's safety and wellbeing.

Children's personal plans needed to improve to support children to experience consistently sensitive and responsive support.

The provider needed to address ongoing maintenance issues to ensure children experienced an environment that was well-maintained, with furnishings, fixtures and equipment in a good state of repair.

Enhanced quality assurance and improvement planning was needed to secure improvements and develop the quality of the service.

The service needed to improve engagement with parents and families to ensure they were included in their children's experiences.

## 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?	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?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses. While the strengths had a positive impact, key areas need to improve.

### Quality indicator 1.1: Nurturing care and support

Overall, children were relaxed and engaged during their time at the service. Staff interactions were friendly, supporting children to feel included. Children were familiar with the routines of the day and quickly settled to their chosen activities. This created a calm and positive atmosphere.

Children's wellbeing was supported as staff often spent sustained periods of time engaging with children. For example, playing games, chatting at snack or helping them with crafts. This enabled the development of positive and familiar attachments. Most children told me staff were friendly, fun and helpful. Some children said staff did not always respond positively. The manager and provider should continue to monitor and support staff practice to ensure all interactions with children are as positive as possible.

The provision of balanced and healthy snacks supported children's health and wellbeing. Children had some opportunities to be independent as they selected their own items of food and poured drinks. To further support children's skills development and involvement in daily routines, the service could consider other ways children could be involved in the snack routines. For example, they could help prepare the items of food or take part in planning the food order. A recent review of the snack menus had taken place. This was positive as some parents told us through the online survey that they felt snack options could be improved. To ensure children and parents are satisfied with the food provided, the service should continue to consult with them about the menus.

Overall, children were safe while eating as they sat at the table and ate in an unhurried manner. Staff were alert to children's allergen needs and made sure the food provided was safe. On some occasions staff became task focused, which took them away from the children. While children who were eating were still in their sight, the social aspect of snack was not maintained. To support children's wellbeing, the manager should guide staff to maintain positive levels of engagement with children during snack times.

Staff knew children well and were able to discuss the ways they supported them within the service. For example, they shared ways they had supported children during transitions and when managing peer relationships. Staff knew children's interests and helped them in their play choices. However, personal planning approaches still needed to improve. Personal plans were not always reviewed effectively within appropriate timescales and some children's information was incomplete. For other children, information recorded in personal plans was not used effectively to plan strategies of support. As a result, there were missed opportunities to promote all children's individual needs. Some parents were unsure whether their child had a personal plan. Parents must have opportunities to review their child's plan every six months or sooner if the need arises. A previous area for improvement had not been met (see area for improvement 2 in 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Overall, staff were knowledgeable about children's medical needs and any medication they needed in the service. However, quality assurance processes needed to improve to ensure that all children's medication was present in the service. The service took swift action to address an issue we identified with medication during the inspection. Moving forward, the provider must ensure that the service is supported to implement

safe and consistent quality assurance practices to ensure the management of medication is effective. A previous area for improvement related to quality assurance had not been met (see area for improvement 5 in 'What the service has done to meet any areas for improvement we made at or since the last inspection').

### Quality indicator 1.3: Play and learning

Activities and resources were planned based on children's interests and staff observations. This helped children to sustain play and engage in creative experiences. The range of experiences meant most children's needs and interests were respected and valued. One child said, "We do lots of exciting stuff. Make slime and sometimes staff play with us."

Children could make independent choices about their experiences. Designated spaces for reading and relaxing, supported children's emotional wellbeing and helped them to experience a joy of books. Children were able to transport resources and develop their ideas, enabling them to be curious and creative. The range of open ended materials such as bobbins, jars, material and other items supported children's play and learning. A good range of craft materials enabled children to be creative and express their own ideas. Many children spent long periods drawing, crafting or building models. One parent said, "My child does enjoy the play especially the crafting and baking opportunities." Some parents felt experiences and resources could be improved. Some comments included, "Some trips away from base on a Friday afternoon would be interesting. A little more variety to the program", while another parent said they would like "more activities" for the children. The service should continue to develop and improve play and learning experiences to ensure the needs of all children are catered for. For example, the experiences outdoors could be further developed and the service could consider how they could include more sensory experiences into the play spaces.

Staff listened to children's ideas showing them that their play was important and valued. Children invited staff into their play and staff responded with enthusiasm. This created a fun and inclusive ethos. To further enhance the range and quality of play, staff should be supported to develop their understanding of play and how they can support children further. For example, through developing their understanding of play types and how they can support children's play opportunities using this knowledge.

## How good is our setting?

### 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses. While the strengths had a positive impact, key areas need to improve.

### Quality indicator 2.2: Children experience high quality facilities

Children did not experience consistently high quality facilities, and the quality of the environment was inconsistent. Some enhancements had been made to quieter spaces with the addition of soft furnishings and materials. Children benefited from these spaces as they could relax, read and chat with friends away from the busier areas. One parent commented, "There is lots of choice about what to do, including quiet spaces". Updated displays with children's artwork and staff photos were welcoming. These displays gave a more homely feel to the environment. However, some spaces remained tired and overall, limited improvements had been made since the last inspection.

Emergency repairs such as blocked toilets or broken lighting were fixed promptly. This went some way to supporting children's safety and wellbeing. However, overall the maintenance of the space remained an issue. Carpets were worn in areas meaning they looked unsightly and could be more difficult to clean. Walls

and window frames were chipped and damaged, making the space feel tired and uninviting. While some issues had been recorded in a maintenance log and reported to the relevant persons, action had been slow and most of the outstanding work was not planned for. Some maintenance issues such as worn wood in the toilet area had not been identified or recorded. The service should improve the approach to quality assurance of the environment to ensure all issues are identified and addressed. The provider should take steps to address the maintenance requirements of the service to ensure children experience an environment which is well looked after, with well-maintained premises, furnishings and equipment.

Effective handwashing procedures and daily cleaning helped reduce the spread of infection and kept areas such as tables and chairs clean. Children were familiar with the handwashing routines and staff provided support if needed. This helped children to develop important hygiene skills. While most spaces used by children were clean, the floor in the gym hall was not. Children told us they did not like this and that they preferred to keep their shoes on as a result. The service should ensure appropriate cleaning takes place to consistently secure children's wellbeing and comfort needs.

Due to the number of toilets available to the service, the provider capped the number of children attending to ensure the amount of children present did not exceed the available number of toilets, in line with good practice guidance. To support children's right to high quality facilities, the service should review the toilet facilities and plan to address the gaps in the current provision. This could include working with the landlord to gain access to more facilities or submitting a variation to the Care Inspectorate to ensure the facilities reflect the registered numbers of children. We will continue to liaise with the service in relation to this (see area for improvement 4 in 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Staff supported children's safety and supervision as they were alert to children's movements. Practices such as head counts and registers were in place. These measures helped staff to ensure all children were accounted for.

## How good is our leadership?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses. While the strengths had a positive impact, key areas need to improve.

### 3.1: Quality assurance and improvement are led well

The service had experienced recent management changes. The new manager and staff team were working well together to develop a shared understanding of the improvements needed in the service. This work was at an early stage, and overall, limited improvements had been made since the last inspection. For example, all areas for improvement remained in place and had not been met. The current improvement plan had been reviewed, and some reflections had taken place about how to move forward with the improvements needed. The staff team were aware of the improvement plan and could discuss their role in supporting this. The provider should ensure the service is supported and encouraged to make progress that impacts positively on outcomes for children.

The approach to quality assurance varied and at times the processes in place were not effective and robust. Gaps remained in the areas covered by quality assurance processes. For example, cleaning checklists and area reviews helped to ensure most areas of the environment were clean. However, other aspects of the service needed further quality assurance to ensure a high-quality service. For example, personal plans were not yet effectively checked and monitored in line with good practice. While overall, medication was

monitored, we found some gaps in quality assurance which led to issues not being noted and resolved. Also, the quality assurance processes in place to support a positive environment were ineffective. Issues remained with the quality of the facilities, which had the potential to impact on children's wellbeing. Further work was needed to ensure the service develops and implements quality assurance processes that effectively monitor the service and in turn aid improvements.

Communication and engagement with parents and families needed to improve. Feedback from parents about the quality of communication and engagement from staff was varied. Some parents felt staff responded well and were approachable, while others felt more input was needed. When we asked, 'What could make the service better:' one parent responded, "A smile and a welcome from the staff team and an update on what my child has been up to during their time at the club". Another parent commented "Generally, the staff don't really approach to engage with you unless there are issues". However, another parent said, "Staff are very friendly and kind, welcoming you into the setting and giving feedback on how my child's morning/ afternoon has gone." During the inspection, we saw some positive interactions with parents, however, there were times when staff did not approach parents and missed opportunities to engage with them about their child and the service. To ensure all parents feel consistently welcomed and included and to promote positive communication, the service should improve the approaches to engaging with parents and families. A previous area for improvement in relation to communication and engagement has not been met (see area for improvement 1 in 'What the service has done to meet any areas for improvement we made at or since the last inspection').

To aid continuous improvement and support the development of the service, the provider should support the manager and staff to consider the vision, values and aims of the service. The vision, values and aims should reflect the aspirations the service has for children, families, staff and the wider community. Reviewing the vision, value and aims of the service could help all staff to know what is important for the service to meet the needs of children and families.

### 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

Effective staff deployment supported children's safety and wellbeing. There was enough staff to supervise children both indoors and outside. Staff were positioned effectively across the play space meaning they were readily available to support children. Staff spent time with children in different areas, engaging in play and chatting with them about their experiences. This created a calm, friendly atmosphere across the service.

Staff communicated well with each other and children. This helped to promote safety and allow staff to adjust deployment when needed. The manager promoted effective deployment as they checked in with staff throughout the session to make sure they had the staff and resources needed to support children.

Staff managed the routines of the day well, ensuring there was enough staff available to support transitions without interrupting children's play. This meant children could decide what activities and experiences they took part in. The registration period for older children did go on for some time and some children did become unsettled. The manager and staff should continue to review this transition period to make sure it meets the needs of all children.

Training in relation to child protection and first aid enabled staff to support children's health and wellbeing. The manager kept track of core training that staff needed. Staff had some opportunities to develop their skills and practice. This was mostly through online learning and discussions at team meetings. Staff would benefit from having more opportunities to engage in a greater range of development opportunities related to their role. This could help improve the care and support provided to children and further enhance experiences at the service. For example, staff may find training in relation to supporting children's development and wellbeing helpful in relation to developing their interactions and implementing support strategies.

Overall, planned and unplanned absences were managed well and children were mostly cared for by a consistent staff team. The provider used staff from their other services to cover absences, meaning they were familiar with procedures and routines. This helped children to experience a continuity of care. Some parents said they were not always well informed about the staff team and who was caring for their child. While inspection evidence found the staff team was consistent, the service should ensure parents and families are kept informed about who is present in the service and what their role is in caring for the children. This could support parents to feel more informed and included.

## 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 ensure parents are informed about their children's experiences and the service, improvements should be made to communication and the levels of engagement the provider, manager and staff have with parents and families.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state: 'I can be meaningfully involved in how the organisations that support and care for me work and develop' (HSCS, 4.6) and '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).

**This area for improvement was made on 8 November 2023.**

#### Action taken since then

Limited action had been taken to address this area for improvement. The service was making good use of their online application to post photographs and communicate with families this way. However, other than this method, communication and engagement was limited. For some families the level of staff engagement with them was poor. To ensure parents and families are informed about their child's experiences and valued as partners in their child's care, the provider should support the service to improve communication and engagement.

**This area for improvement had not been met.**



### Previous area for improvement 2

To ensure children's personal plans are reflective of their care and support needs, the provider should ensure plans are reviewed and updated with staff, children and parents every six months or sooner if needed. Information within personal plans should be used to develop strategies of support that enable staff to provide responsive and consistent care.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state: 'I am fully involved in developing and reviewing my personal plan, which is always available to me. (HSCS, 2.17) and '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).

**This area for improvement was made on 8 November 2023.**

#### Action taken since then

Gaps remained in the information held for children and some personal plans had not been reviewed in line with good practice guidance. Information present was not always used to effectively plan for a child's care and support needs. As a result, staff were not always providing responsive and consistent care for individual children. Improvements should be made so that approaches to personal planning are effective and reflective of children's needs.

**This area for improvement had not been met.**

### Previous area for improvement 3

To ensure children experience a consistently positive and respectful environment, the provider should ensure ongoing maintenance needs are identified and actioned through effective quality assurance. This would include but not be limited to carrying out repairs and upgrades to the fixtures and fittings of the building.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS, 4.19).

**This area for improvement was made on 8 November 2023.**

#### Action taken since then

The management and actioning of maintenance remained an ongoing issue. As a result, children did not always experience high quality facilities. The environment including facilities, furnishings and equipment were often tired and looked uninviting. Carpets, paint work, cupboards and skirtings were worn and not in a good state of repair. This did not give children the message that the space was well-maintained and cared for. Further work was needed to ensure action was taken to improve the facilities and furnishings.

**This area for improvement had not been met.**

### Previous area for improvement 4

To support children's right to high quality facilities, the service should review the toilet facilities and make a plan to address gaps in the current provision. This would include but not be limited to ensuring there is enough toilets to meet the conditions of registration.

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

state: 'My environment is secure and safe' (HSCS 5.17) and 'I experience a service that is the right size for me' (HSCS, 5.5).

**This area for improvement was made on 8 November 2023.**

## Action taken since then

The service were aware of the issue with the number of toilets not meeting the requirements for the conditions of registration. As an interim measure the service had capped the number of children in line with the number of facilities available. Moving forward, the provider should make a decision and put in place a plan to address this ongoing issue. This is to ensure children experience high quality facilities that meet their needs.

**This area for improvement had not been met.**

## Previous area for improvement 5

To improve children's experiences and support ongoing improvements the manager and provider should develop a culture of continuous improvement and ensure effective improvement planning, self-evaluation and quality assurance systems are developed and used in the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I use a service and organisation that are well led and managed' (HSCS, 4.23) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS, 4.19).

**This area for improvement was made on 25 November 2021.**

## Action taken since then

Some aspects of quality assurance and improvement planning were supporting the quality of the service. However, a culture of continuous improvement was not yet established. Quality assurance and improvement planning was not yet identifying all strengths and areas for improvements. At times, improvements were not always identified and where the need for improvement had been identified it had not been progressed. As a result, children and families were not yet experiencing a consistently high quality service. Improvements were needed to the quality assurance processes and more work was needed to include children and families views in the processes for quality assurance, including self-evaluation and improvement planning.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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?	4 - Good
4.3 Staff deployment	4 - Good

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