

Noah's Ark Nursery Day Care of Children

Johnstone Street
Bellshill
ML4 1DE

Telephone: 01698 740 722

Type of inspection:
Unannounced

Completed on:
25 April 2025

Service provided by:
Living Waters Church

Service provider number:
SP2010011016

Service no:
CS2010254754

About the service

Noah's Ark Nursery is registered to provide care for 55 children aged from birth to those not yet attending primary school. Eight children from birth to two years, 15 children from two to under three years and 32 children aged from three to those not yet attending primary school. At the time of inspection 43 children were registered with the service.

The premises are situated in a stand alone building within an industrial estate in Bellshill. Children are cared for within three separate playrooms and have access to an enclosed garden. The service is close to local amenities and bus routes.

About the inspection

This was an unannounced inspection which took place on 24 and 25 April 2025 between 09:15 and 17:00. 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.

As part of this inspection we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning. This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting.

This information will be anonymised and analysed to help inform our future work with services.

In making our evaluations of the service we:

- spoke with children using the service and three of their family members
- received eight completed questionnaire responses from families
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm, consistent and responsive care from staff, which helped them feel loved, safe and secure.
- Staff were knowledgeable about best practice and used this to influence changes. As a result, children were supported, settled and enjoying their nursery experience.
- Most children were developing their curiosity, imagination and problem solving through play experiences.
- Children were cared for in a warm, nurturing environment where they were supported to develop their independence, skills and abilities.
- Children's health and wellbeing was enhanced through daily access to outdoor play.
- The service should continue to develop the environment for younger children to promote their independence, choice and natural curiosity.
- Medication systems should be reviewed to support safe storage and administration of medication.

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, caring and nurturing approaches from staff who knew them well. This helped them feel safe and secure. Staff were down at children's level engaging in play and conversations, they listened and followed children's play ideas. This helped children feel valued and respected. Children told us "[staff] look after me, they make me laugh and give me a cuddle when I'm sad" and "I love the ladies in my nursery, they make me feel safe." Parents told us "the staff are always so friendly and welcoming and ensure my [child] receives the best possible care while attending" and "its like a home for home with the care and love towards my child. I know every child's wellbeing and safety are made a priority."

Since the last inspection, parents and carers were involved in nursery life. Parents were now entering the nursery and planned events, such as stay and play days, had been well received by families and contributed to strengthened relationships that supported meeting children's needs, whilst also developing positive connection with families. Parents told us "the nursery often has stay and play days involving parents and grandparents and I feel this is a great way to build positive and meaningful relationships" and "staff welcome parents at the door which I love as it gives us 1-2-1 time if we need to discuss any aspects of my child's care. There are a lot of stay and play sessions as well, where we are invited in to play alongside our children which is also amazing."

Overall, children's wellbeing was being supported through personal plans, where important information was gathered to support their needs. These were created in partnership with parents which helped to promote consistent care for children. One parent told us "I work with staff to set targets for my child which we sign off when met and also review his progress folder regularly." Staff knew children's needs well and used responsive and skilful interactions to support their development. We discussed where personal plans could be further developed to ensure they are tailored to each child's individual needs, preferences and interests. This would include clear strategies to support children's development.

Children with additional support needs had detailed personal plans (GIRFMES) that supported their progression and development within the service. We discussed ensuring this level of consistency is reflected within all personal plans.

Children were encouraged to make independent choices throughout their session, including snack time. This experience promoted children to develop their independence and skills for life. Opportunities were provided for children to prepare snacks and children confidently told us "we help make snack" and "you have to be very careful when cutting with the knife."

Children benefitted from a relaxed, unhurried and sociable lunchtime experience. They were involved in setting the table and had opportunities to self serve. Staff positioned themselves at tables to supervise and support children if required. They interacted with children throughout the lunchtime experience, supporting their language and communication skills. We discussed where children's independence could be further enhanced and the service actioned this immediately, for example, ensuring children could access milk and water throughout the lunchtime experience.

Whilst meals were mostly nutritious, we discussed where further consideration could be given to ensure alternative choices were nutritious. The service shared they had plans to develop their menus through partnership working with parents and using the new 'setting the table' guidance. We agreed this would be beneficial.

Most medication was stored appropriately and easily accessible within playrooms or nearby fridges. We discussed where storage could be further improved to support staff to quickly identify medication when required. When reviewing medication, we identified some areas for improvement. This included reviewing medication guidance to gain an understanding of short term medication. The service should also develop their approaches to ensure medication was being reviewed with parents in line with best practice. We asked the service to develop effective systems to ensure processes were in place to support the safe administration of medication. (See Area for Improvement 1).

Quality indicator 1.3: Play and learning

Children were playing throughout the service with friends and staff. Most children were engaged in their play and having fun. Children told us they liked "playing with toys and my friends and teachers", "I like the bikes in the garden" and "I like mixing the paints together."

Overall, children were leading their own play and learning through a balance of planned and spontaneous experiences. They mostly had choice and independence of where they wanted to play and how they would lead their play both indoors and outdoors. Older children could freely move between indoor and outdoor spaces, supporting child led play. Play and learning was supported by having access to varied play experiences, where children also had the opportunity to use their imagination and explore their natural curiosity. For example, using tuff trays with natural objects to make scented teas, exploring sand, and mixing paints together. We discussed where play opportunities could be further developed within the baby room, to stimulate and challenge children according to their age and stage of development.

Play experiences provided opportunities to develop children's skills in language, literacy and numeracy. For example, staff read stories to children who joined in to repeat words and they sang with children. Children's numeracy skills were supported through staff interactions. Staff used mathematical language to support children when counting, measuring, sorting and matching. The service should consider adding further resources both indoors and outdoors to enhance children's literacy and numeracy skills. For example, adding resources within house corner to encourage mark making.

Staff were responsive to children through their observations and were beginning to adopt a questioning approach to encourage and support children's play and learning experiences. For example, children were encouraged to predict what might happen next when mixing different colours of paint together. Staff should continue to develop their skills and confidence in extending children's learning through meaningful conversations. To further support staff's understanding of how children learn and develop, the management team should continue to upskill staff through training and development opportunities.

Areas for improvement

1. To ensure children's health needs are met, the provider should improve medication processes to ensure medication can be administered safely. This includes, but is not limited to, ensuring short time medication is managed appropriately, and further developing audit processes.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)

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 playrooms were clean, bright and offered a range of spaces for children to make choices, support interests and develop ideas. Some homely touches, such as displays, photographs and soft furnishings helped create a welcoming environment for children and their families.

Since the previous inspection, the service had completed environment audits, which had supported them to create an enabling environment for older children. Careful consideration had been given to the layout of most rooms to offer a range of spaces for children to make choices, support their interests and develop their ideas. The freely chosen play opportunities allowed children to lead and direct their own learning. For example, we observed children engaging in play at the block play area for extended periods of time, confidently talking about their creations. Children told us "I like building with blocks" and "look, I'm making a home for the dinosaurs."

Spaces were interesting and well resourced, promoting curiosity and a sense of wonder. For example, role play areas contained many real life resources such as food, crockery and pots and pans. These opportunities supported children in developing their imagination, social skills and creativity. We discussed where this could be further enhanced to promote literacy and numeracy skills.

We also discussed where further consideration could be given to support children's play and development within younger playrooms. The service should continue to review spaces, developing provocations and invitations to learning to support and stimulate children's natural curiosity, whilst also providing challenging experiences for younger children. This should include, developing resources and opportunities within younger rooms to support child led play, with a range of resources to stimulate creativity and imagination.

Children's health and wellbeing was promoted through daily opportunities to play outdoors. They were confident, moving freely and independently between the indoor and outdoor spaces. Parents told us "the children are regularly outdoors" and "the outdoor garden is a great place for the kids to form friendships & explore outdoors." Children told us "we can go outdoors in the rain" and "I love the garden, come and see it." Staff understood the importance of outdoor play and were passionate about providing a variety of different experiences outdoors.

Outdoor play spaces were planned according to children's interests and staff were responsive to this. A range of natural and open ended materials supported children's imagination and curiosity. These resources were easily accessible for children to independently access and direct their learning outdoors. They made good use of this and were confident when using all areas of the outdoor space. Children spent prolonged periods of time at the mud kitchen, exploring units of measurement and enjoying the wonder of pouring and transporting water from different containers. Opportunities for younger children outdoors included sand play, bikes and exploring musical instruments. In addition, they explored a space for digging soil and stones, connecting children with nature. The service had plans to further develop their outdoors space and we agreed this would continue to support their physical development and exploration.

A range of robust safety measures were in place, including a secure entry system and clear boundary fencing. Staff communicated well with each other, with regular head counts which helped ensure children's safety and supervision. Daily safety checklists and risk assessments were used by staff to proactively identify potential hazards. Children were encouraged to participate in risk assessing and were keen to share with inspectors how they kept themselves safe through the use of SIMOA (the Care Inspectorate's 'keeping children safe' campaign). This minimised risk and helped to ensure the overall safety for children.

Infection control practices minimised the potential spread of infection, supporting a safe environment for children. The nursery was clean and handwashing took place regularly. Since the previous inspection, the service had improved children's bathrooms and nappy changing areas. Nappy changing areas were clean, with personal protective equipment being stored appropriately, and all nappies and resources were stored hygienically. The service had also improved the storage of soiled materials and there were effective systems in place for the storage and removal of waste within the service.

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.

Leaders promoted a clear vision that helped staff understand the aspirations of children and their families. The nursery vision had recently been developed in consultation with staff and families to help shape the service in a way that meet children's needs. This was also supported by a dedicated staff team, who were reflective of their practice and were keen to make changes to ensure positive outcomes for children and their families.

Since the last inspection the service had been supported through regular visits and support from the local authority to support staff in developing positive outcomes for children. For example, improvements to environment, lunchtime experience and self evaluation training. These changes had been documented through a well informed floorbook and staff were knowledgeable about the improvement journey.

Quality assurance processes were in place. This included a clear improvement plan with realistic targets to develop a highly skilled workforce and improve parental engagement. Distributive leadership was in place with staff members taking on champion roles. This helped staff to understand the role they would play in supporting improvements to children's care, play and learning.

The service had developed their monitoring approaches and staff were supported by management to develop their practice. This included room observations, individual appraisal and supervision of staff practice. We discussed where quality assurance processes could be further developed, this included audits to support children's health and wellbeing. For example, audits of medication, as well as accident and incident audits. Policies and procedures were in place to support practice within the service. We asked the service to update their child protection and medication policy, to ensure information was clear and reflected current guidance.

Opportunities to include families in the service and welcome their feedback was provided through questionnaires and informal chats. Information was shared with families through a range of communication methods, such as newsletters and notice boards, which helped families feel included.

Parents told us "parents are regularly asked for feedback" and "we are asked our opinions on ideas they have, allowing us the chance to give feedback/offer ideas."

Families told us they had developed positive relationships with staff and that they felt informed about their children's experiences when in the service. Parents were warmly welcomed into the playrooms at drop off and collection times. One parent commented "I have a great relationship with staff, they are very helpful and caring and welcoming. I have been made to feel very welcome and supported."

A programme of training was in place that helped ensure staff were supported to develop as practitioners. Staff were involved in initiating well informed changes by being part of working groups. Staff spoke enthusiastically about how training had influenced their practice and implemented positive experiences for children. For example, the development of block play and literacy training. Staff within their 'champion roles' used a floor book approach to document improvements to the environment and play based approaches. We discussed how the service could further enhance this by recording staff's reflections on training and how it has impacted on creating positive experiences for children.

The management team and staff were reflective and understood that they were on an improvement journey. The service was led by an experienced manager who wanted to get it right for children and families within the service. Staff spoke of working well together and how the management team supported them in their role. Staff told us their views and suggestions mattered. Regular team meetings and opportunities to communicate empowered staff to discuss, identify and take forward areas for improvement. Staff told us "management include staff in self evaluation by peer evaluation and self reflection for planning. Questions are asked on how the service can improve and staff are able to share any new suggestions to help improve the quality of the service" and "our voices are heard and taken on board."

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 were kind, caring and nurturing in their interactions with children. They were respectful and affectionate towards children helping to support positive connections.

The staffing model in place meant that staff worked within the same room, ensuring children were familiar with staff and supported continuity of care. This was enhanced by a Keyworker system, which meant that staff were able to build relationships with parents and children. Parents told us staff were "warm and welcoming, friendly and supportive. They keep me informed of my child's needs and goals, they respect me as a parent and they respect and care for my child like their own" and "incredibly attentive and caring staff who support children's overall wellbeing and development."

Overall staff were appropriately deployed within the setting, ensuring a mixture of differing experienced staff worked together. The management team also provided support in playrooms when required. This provided opportunities for good role models and mentoring of less experienced staff to help ensure positive experience for children. However, we discussed where further consideration could be given to ensure staff deployment would support trainees within their role.

An area for improvement was made at the last inspection, and whilst we recognise there has been improvement, further work is needed to ensure all children experience high quality care. Therefore, the area for improvement will continue at this inspection.

Since the last inspection the service had developed their induction approaches, this included using the 'National Induction Resource.' This helped to ensure management could support new staff in developing their skills and knowledge, whilst also providing opportunities for staff reflections and professional dialogue. Newly appointed staff told us they had been warmly welcomed by the staff and management team. They commented that their induction was positive and helped them to understand their roles and responsibilities and also the expectations of the management team.

Staff communicated regularly throughout the session with each other, which helped ensure children were effectively supervised and information was shared to support children's needs. For example, good use of walkie talkies to ensure children needs were met when playing outdoors.

Management and staff engaged very well during the inspection and were confident, open and professional in their discussions. They were receptive to feedback and willing to make improvements to ensure good outcomes for children.

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 support staff to develop their skills, knowledge and understanding of children's play, learning and development, the manager should arrange for staff to undertake related professional development activities. Staff should then reflect on their learning and embed it in their practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which states: '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 5 March 2024.

Action taken since then

Staff had participated in a range of training to support their development, whilst also developing their skills and knowledge. Recent training included block play, play on pedals and self evaluation. Staff were using information from their training to support children's care, play and learning, which was contributing towards positive outcomes for children.

Staff were also engaging with best practice documents to support the delivery of the service. The service should continue with this approach to ensure high quality outcomes for children within the service.

This area for improvement has been met.

Previous area for improvement 2

To help ensure children experience a stimulating, safe and well managed setting, management and staff should regularly audit the environment. This should include, but is not limited to, ensuring high quality resources are available indoors and outdoors to support natural curiosity, creativity and imagination, in a safe and well maintained environment.

This is to ensure care, play and learning is consistent with the Health and Social Care Standards (HSCS) which states that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27); and 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials.' (HSCS 1.31).

This area for improvement was made on 5 March 2024.

Action taken since then

Since the last inspection the staff team had completed audits of the environment. These contributed towards creating a warm, cosy, stimulating and safe environment. The service had reviewed spaces and had added more open ended resources to supports children's play and learning. This included developing the house corner, extending the block play area, creative area and further developing outdoor spaces.

We discussed where this could be further developed, with a particular focus on younger children.

This area for improvement has been met.

Previous area for improvement 3

To ensure the quality of children's experiences are improved, management should implement robust quality assurance processes, including self evaluation covering key areas of practice. This should include but is not limited to children's personal plans, children's play and learning experiences, staff practice and medication.

This is in order to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state, '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 5 March 2024.

Action taken since then

The service had developed their quality assurance approaches since the last inspection. This included an informed self evaluation approach, which included contributions from staff and parents, to support the continuous improvement within the service. Approaches such as room monitoring and supervision of practice were supporting positive outcomes for children, whilst also encouraging staff to develop their knowledge and skills.

Management had developed a system to audit play and learning and children's personal plans. We discussed where audits should be further developed, for example, medication and accident/incident audits. Management agreed that further management oversight was required within these areas.

This area for improvement has been met.

Previous area for improvement 4

To ensure the quality of children's experiences are improved, management should implement robust quality assurance processes, including self evaluation covering key areas of practice. This should include but is not limited to children's personal plans, children's play and learning experiences, staff practice and medication.

This is in order to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state, '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 5 March 2024.

Action taken since then

The service had reviewed the deployment of staff and staff were deployed to ensure a mixture of skills, knowledge and experience. Staff deployment supported children's choice and children were able to lead and direct their play choices, whilst also ensuring their individual needs were met.

We asked the service to consider the deployment of trainee staff to ensure they were supported to develop their skills and knowledge, whilst also ensuring staff could be responsive to the needs of children.

Whilst progress has been made within this area for improvement, the provider and manager should continue to monitor and review staff deployment to ensure it is responsive and meet children needs.

Therefore, this area for improvement has not been met and will continue.

Previous area for improvement 5

To ensure positive outcomes and consistency of care for children the provider and management should monitor and review the deployment and positioning of staff to ensure these support children's choices, independence and meet their individual needs.

This includes but is not limited to, ensuring a balance of staff skills, experience and knowledge in playrooms and reviewing procedures at key points of the day, such as beginning and end of day.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state, 'My care and support is consistent and stable because people work together well' (HSCS 3.19) and 'I am supported and cared for by people I know so that I experience consistency and continuity.' (HSCS 4.16).

This area for improvement was made on 5 March 2024.

Action taken since then

Since the previous inspection, bathrooms for older children had been refurbished. This included installing wet walls to ensure bathroom's could be easily cleaned. Changing areas for younger children had also been reviewed and there were plans in place to develop bathroom areas for under threes.

The service had also improved the storage of soiled material and effective systems were in place for waste products.

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?	4 - Good
4.3 Staff deployment	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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