

Mearns Primary School Nursery Day Care of Children

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Newton Mearns
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Type of inspection:
Unannounced

Completed on:
19 March 2025

Service provided by:
East Renfrewshire Council

Service provider number:
SP2003003372

Service no:
CS2003017009

About the service

Mearns Primary School Nursery is provided by East Renfrewshire Council. The service is registered to provide a care service to a maximum of 60 children aged three and above at any one time. The age range of the children will be three years to not yet attending primary school. Minimum staffing levels to comply with schedule of staffing 5/7/2004, which must be displayed together with the certificate.

The service operates within designated areas within the primary school, and children had access to an enclosed outdoor play area.

About the inspection

This was an unannounced inspection which took place on Tuesday 18 March and Wednesday 19 March 2025. This 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 complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

This inspection was part of a pilot to test the 'Quality improvement framework for early learning and childcare sectors', developed jointly with Education Scotland. Because this inspection was part of a pilot, no new evaluations (grades) have been awarded.

During the inspection we:

- Spoke with people using the service.
- Received 10 completed questionnaires responses from parents.
- Spoke with staff and management.
- Observed practice and daily life.
- Reviewed documents.

Key messages

- Staff knew children well and spoke about their personalities, interests and how they were supporting children to meet their needs.
- The service worked well with families to foster connections and develop relationships.
- Children were confident, happy, and having fun. They had free flow access to outdoors at a time to suit their needs.
- Medication recording formats, policies and procedures require to be reviewed and updated in line with current best practice guidance 'Management of Medication in Daycare and Childminding Services'.
- Personal plans and 'all about me' information should be streamlined, to ensure information is clear and concise for all staff to follow, including strategies and next steps.
- We identified areas of the nursery that required attention, to support a safe and clean environment.
- The service must establish clear policies, procedures, and guidelines, in line with current guidance and legislation, to ensure robust and effect approach to safeguarding and child protection.

Children thrive and develop in quality spaces

Quality Indicator – Children experience high quality spaces.

The nursery was warm, welcoming, and well-ventilated. Within the playroom and outdoors there was ample space for children to play together or on their own if they wished. Children had free flow access to the outdoor area and were independently and confidently putting on outdoor clothing with staff assisting, when required. We observed children accessing areas with confidence and engaging with their peers in developing their play and learning. As a result, children were having fun, developing skills in independence while having regular access to outdoors at a time to suit their needs. Parents told us.

'The staff are brilliant and 100% focused on nurturing and educating the children'.

'The nursery is always well-equipped, and the resources are sufficient'.

Children had been consulted and included in the development of the nursery garden and were supported by staff to access, discover, play, and learn in the outdoor play spaces. For example, places to grow flowers and vegetables and creating a bug hotel. This was supporting their individual choice, play, learning and wellbeing. Parents told us.

'I know my child thrives on leading his/her own learning and the environment allows him to do this'.

'They are superb with my child, and I have complete confidence in their ability to teach and care for him/her'.

Staff had developed areas indoors to support children's curiosity, taking account of their developmental stage of play and learning, along with some suitable resources and areas of interest for children to freely access. However, staff need to continue to work on areas inside, developing provocations, creative experiences, and the layout of the room, to support children's engagement. For example, the story area, messy and wet area, creative and malleable area. This will support staff in providing a physical environment that has been designed to empower children to actively experience play and learning, centred on their needs and interest.

Children were accounted for when moving out with the nursery environment. For example, going to the kitchen, the woods, or the gym hall. However, it was not always clear how staff were tracking children moving from inside to the outside nursery garden, accessing the toilet or corridor area. We discussed with management the need for a system that ensures staff are consistently aware of children's whereabouts. For example, using radios to communicate. This will ensure children are always accounted for both indoors and outdoors.

The service entrance had a secure door entry system, and visitors signed in on arrival and departure. Children's information was stored appropriately and secured within the office or the playrooms. We sampled risk assessments that were in place, to support a safe environment. Children participated in daily risk assessment of the outdoor and inside area giving them responsibility and ownership. We have asked management to develop risk assessments to include the indoor playroom environment.

Accident and incidents were being recorded and shared with parents. Management advised that monthly verbal audits had been shared with staff during staff meetings. We have asked management to now complete a formal process and have a written record of monthly audits to identify any areas of risk, and any changes required to support a safe environment for children.

Staff and children washed their hands before mealtimes. We would encourage children and staff to wash their hands at other key points of the day, including when they come in from outdoors. Staff should also support children with personal care and encourage children to wash their hands and face after lunch. This will help to stop the spread of infection and ensure children and staff are kept safe and healthy.

We identified areas of the nursery that required attention to support a safe and clean environment. We found the sink areas in the playroom required to be renewed, as they have exposed porous surfaces which were unable to be cleaned. For example, the edges of units and seals along the floor. We found the children's toilet door was always open, due to it being too heavy for children to open and close. This should be reviewed so the door can be closed to support children's privacy and dignity and good infection prevention and control.

We found a number of cluttered areas within the playroom that would benefit from being organised. Within the staff kitchen area, management should put a risk assessment and guidance in place for the washing machine and organise the storage of equipment, to support a safe, clean, and organised environment. (See area for improvement 1)

Areas for improvement

1. To ensure children experience high quality facilities, that support children to play and rest in an environment that is well maintained and supports rigorous infection prevention and control. The provider and manager should consider attention to the following areas:

- Repairing sink areas and flooring that have exposed porous surfaces.
- Review the children's toilet door to support children's privacy and dignity and good infection prevention and control.
- Clear cluttered surfaces within the playroom and kitchen area and implement a risk assessment and guidance, for the use of the washing machine.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience an environment that is well looked after with clean, tidy and well- maintained premises, furnishings and equipment'. (HSCS 5.22)

Children are supported to achieve

Quality Indicator - Nurturing care and support.

Overall, children were happy, confident, and having fun, children experienced warm, nurturing, and responsive care from staff which helped them to feel welcomed in the setting. We observed staff to be kind, caring and respectful which supported children to feel safe and secure in the service. Parents told us.

'All the staff are approachable, but I do like how involved the principal teacher is, she really knows all the children and is visible on a day-to-day basis'.

'Our little child loves all the staff. They are so caring and easy to talk to and always help with any queries or issues'.

'Staff are always welcoming'.

The service worked well with families to foster connections and develop relationships for example through nurture nature session, Mearns marchers, bilingual blethers, and family book bug sessions. We spoke to parents during inspection as they were taking part in the nurture nature sessions and they told us they felt involved, connected, and included. They valued the opportunities to be a part of their child's time at the service and found staff approachable, engaging, and supportive. As a result, family engagement was having a positive impact on outcomes and experiences for children and their families. Parents told us.

'Staff always make time to speak to my child and family'.

'My child talks about many different staff members at home, showing he/she has positive, trusting relationships at nursery'.

'Staff deal with any queries promptly and communication is good'.

As a team, the service were recognising and supporting a variety of cultures for example, children were attending Namaz, a form of worship, with their siblings and families and have planned an Eid and Easter celebration for later in the month. This was impacting positively on children's care and support and showing their beliefs are valued.

Staff knew children well and spoke about their personalities, interests and how they were supporting children to meet their needs.

Personal plans and 'all about me' information had been gathered for all children present. Although staff could tell us how children were being supported and information was recorded, we found inconsistencies with the process.

It was not always clear 'how' staff would support and enhance children's health, wellbeing and safety or foster their play and learning. In line with legislation the management team, along with staff, should streamline the recording of information and develop a consistent approach across the service. This will ensure children's information is clear and concise for all staff to follow, including strategies and next steps. A more consistent approach will enable staff to provide positive outcomes for all children. (See area for improvement 1)

Lunch and snack were a sociable experience for some children and staff were encouraging children to be independent through self-serving and clearing away their dishes. Children were offered a varied snack and lunch along with milk or water. When preparing fruit staff should follow the 'Food standards agency early years food chocking guidance' to ensure all food is served as recommended. Children's allergies and food preferences should also be updated to ensure all staff are confident of what children can eat. We would ask staff and management to continue to develop lunch and snack with a focus on staff having a more active role, to develop relationships, conversations and promote social and life skills.

Medication recording formats, policies and procedures require to be reviewed and updated in line with current best practice guidance, 'Management of Medication in Daycare and Childminding Services'. Management should develop a flow chart with clear steps, to action for children with allergies or asthma and have updated permission consents for any medication held currently in the service. This will ensure children are administered medication safely. (See area for improvement 2)

Quality Indicator - Safeguarding and child protection.

Staff knew children and their families well and had developed good relationships resulting in high levels of trust and communication. Staff were recording and reporting on any needs or concerns of children and their families. However, reporting, responding to and recording of concerns were inconsistent and not always effective. This had the potential to compromise children's safety and care.

Record keeping was inconsistent and did not always show a clear understanding of risks to children. Opportunities to ensure appropriate supports were missed. Partner agencies were not kept informed to support children and families. This showed us that links with other organisations, which could assist in the protection of children, were not fully effective.

Staff had yearly training on safeguarding children and families. They told us they were confident in who they should report concerns to and advised where they could get support or advice if the child protection coordinator was not in the service.

Leaders are required to have a clearer understanding of their roles and responsibilities to keep children and families safe. The service must establish clear policies, procedures, and guidelines, in line with current guidance and legislation, to ensure a robust and effective approach to safeguarding and child protection is in place. (See requirement 1).

Requirements

1. By 30 May 2025, the provider must ensure children are safeguarded and protected from harm. To do this, the provider must, at a minimum:

- a) Ensure an audit of safeguarding procedures are conducted within the service.
- b) Ensure the manager and staff are knowledgeable and understand the reporting, responding, and recording of child protection concerns.
- c) Ensure the manager implements a robust recording system that is clear and concise to follow, track and understand when reporting, responding, and recording child protection concerns.
- d) Ensure policies, procedures and guidance is updated and in line with current guidance and legislation.

This is to comply with Regulation 4(1)(a) (Welfare of users); Regulation 7(2)(c) (Fitness of managers); and Regulation 9(2)(b) (Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20); and 'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies'. (HSCS 3.25).

Areas for improvement

1. The manager and staff should streamline information gathered to ensure personal plans are sufficiently detailed and consistent across the service. This should include but not be limited to identifying 'how' staff will support and enhance children's health, wellbeing and safety or foster their play, learning and next steps with focused targets and strategies that are clear and concise for all staff to follow.

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

2. To keep children safe and healthy, management should review and update recording templates and policies and procedures to ensure all information is in line with best guidance 'Management of medication in day care of children and childminding services'.

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

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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