

Rosemount Little Rascals Limited

Day Care of Children

12 Rosemount Road
Arbroath
DD11 2AU

Telephone: 01241 876 777

Type of inspection:
Unannounced

Completed on:
24 April 2025

Service provided by:
Rosemount Little Rascals Limited

Service provider number:
SP2007009109

Service no:
CS2006138924

About the service

Rosemount Little Rascals Limited provides a daycare of children service in Arbroath. The service is registered to provide care to a maximum of 41 children of an age not yet attending primary school, of whom no more than 15 may be aged under 2 years.

The service is located within a residential area of Arbroath and is close to local parks, shops and the beach. The nursery consists of four playrooms and a large secure outdoor play space for children to access.

About the inspection

This was an unannounced inspection which took place on 22 April 2025 between 08:45 and 16:30. Feedback was shared with the service on 24 April 2025.

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 registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with children using the service;
- received 20 completed questionnaires from parents and staff members;
- spoke with staff and the management team;
- observed practice and daily life;
- reviewed documents.

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.

Key messages

- Interactions between staff and children were warm, kind and caring.
- The service was at the early stages of developing their approach to quality assurance.
- The outdoor play area had recently been developed which provided children with a range of resources and experiences to support their play and learning.
- Management should consider staffing levels and the deployment of staff to ensure children's needs can be fully met.

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?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate

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

Quality Indicator 1.1 Nurturing care and support

Interactions between staff and children were kind and caring. Most staff were down at the child's level during interactions and play. Cuddles and reassurance were offered when children were upset or unsure about a situation. This resulted in children feeling safe, secure, and confident while in the care of the staff. One parent commented 'staff are a credit to the setting. They are so friendly and kind, always welcoming when my child comes in and greeting her with a smile and a cuddle.' Staff encouraged children to develop their independence by putting on their own coats and changing shoes prior to outdoor play.

Staff interacted with children throughout the nappy changing process and shared what was about to happen next. Management should be mindful of children's privacy and dignity during nappy changing and toileting. Children should be encouraged to wash their hands after nappy changing. This would minimise the risk of spread of infection and would support children to develop a routine of hand washing after toileting.

Medication consent forms were in place and had been reviewed every three months in line with guidance. The service should ensure that there is adequate information recorded on these forms to identify signs and symptoms and how to deal with emergency situations. This would ensure that children's health and wellbeing needs could be fully met.

Each child had a personal plan in place to support staff to meet their needs. These had been reviewed six monthly or sooner in line with current guidance. The service should ensure that all registration forms are reviewed every six months as part of the personal plan reviews. One parent shared 'I am fully involved in my child's care and I get regular updates reviewing his plan.' Management should continue to develop these plans to include more detailed information for children. Individual education plans had been developed for children who required additional support. These plans included goals and strategies to support children to progress and achieve.

Mealtimes were nice sociable experiences for children. Staff sat with them and supported them as required. The older children were encouraged to develop their life skills and independence throughout by preparing snack, pouring drinks, and serving their meals. The younger children were supported to develop their independence, however, there were several missed opportunities for life skills to be developed. The youngest children were provided with appropriate utensils to support them to feed themselves in a calm and relaxed environment. Staff were knowledgeable about allergies and managed dietary requirements well. The service should continue to develop the mealtime experiences to support children's life skills and independence.

Cosy spaces were provided within all rooms as well as outdoors. Children accessed these comfortable spaces for story sharing and during play. Staff followed children's routines from home to offer opportunities for children to sleep. Children were comforted and supported by staff to fall asleep or rest. Soft music was used to comfort and meet the needs of one child. This ensured children were provided with opportunities to rest or sleep throughout their day.

Staff were aware of the child protection processes in place to keep children safe. Significant events were recorded in individual chronologies. It would be beneficial for the service to develop a flow chart to guide and support staff through the whole child protection process. This would ensure children's needs were fully met and they were protected from harm.

1.3 Play and learning

Children were choosing where to play and which resources to play with both indoors and outdoors. The older children were leading their own play and became engaged in construction activities within the playroom. Younger children were supported to play and develop their curiosities through a range of sensory experiences and resources to develop fine motor skills. Staff should reflect on play experiences and provide further provocations to develop curiosity, imaginations, and creativity. One parent shared 'The classroom activities are child-led so they feel included in the planning and also enjoy the activities.'

All children were engaged in quality play in a well-resourced outdoor play area. Children worked together to transport stones from one area of the construction site to another using buckets and spades. Children designed and created castles in the sand area, took part in mark making and were active on a variety of bikes and ride on resources. The outdoor area provided a range of opportunities for all children to safely play together in one space.

Language, literacy, and numeracy was now evident both indoors and outdoors through displays, signage, books, and music. The service were being supported by the local authority to develop this further to support and develop experiences for children.

Weekly planning in each room supported play and learning opportunities for children. Staff were responsive to children's interests and used observations of children's play, to extend and develop play and learning experiences. There was a range of planned and spontaneous learning to support children's development and progression.

Children's individual learning was recorded in their learning journals through a variety of observations and photographs. Each observation had a future possibility which was set to support children's progression. These folders were shared with parents who were also involved in regular meetings to review their child's learning. One parent commented 'lots of learning activities on a daily basis including art and crafts and playtime as well. Plus trips outside, for example to library, fire station, playground, and care home.'

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 environment was welcoming and homely. Comfortable areas were provided both indoors and outdoors. One parent commented 'The room my child is in is always clean and feels so homely and comforting.' Photographs of children and their families were displayed on the walls along with children's artwork. This ensured that children felt valued.

Most areas within each room were well resourced to support children's play and learning. The service should continue to monitor and evaluate their environments to make effective use of all spaces. This would ensure that quality play experiences were available in all rooms to develop children's curiosity, imaginations, and creativity. Children were observed to be more engaged in their play outdoors which had been recently developed to include a well-resourced construction area. An area for younger children had been created which included resources to support them to stand and move about. There were a broad range of play and learning experiences outdoors to support problem solving, creativity and exploration. Children of all ages mixed during their play outdoors which provided opportunities for older children to role model their play and learning and support younger children. One parent shared 'The garden area is beautiful and the children are out as much as possible.'

The service was safe and secure with the main door being locked and the gate in the garden being triple bolted. High walls and fences limited opportunities for children to leave the premises. Regular head counts of children both indoors and outdoors were carried out throughout the day. Accidents and incidents were recorded in detail and were shared with and signed by parents. Risk assessments were in place to support a safe environment. The service are now planning to involve children in visual risk assessing of their environments. This will develop their awareness of potential risks around them and how to stay safe.

All staff had now completed infection control training following on from the last inspection. The service had been deep cleaned, and cleaning schedules were now in place and being completed daily with regular checks being carried out. We had a discussion with management about ensuring that surfaces outdoors were kept clean of bird faeces particularly in the area accessed by the younger children. The service were responsive to this and had plans in place to resolve this issue. The infection control processes that had been developed were now supporting the service to minimise any potential risk of spread of infection.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

Quality Indicator 3.1 Quality assurance and improvement are led well

The service were currently undertaking a consultation with staff, children, and families to review their values and aims. This would ensure a shared approach to expectations, values and aims for the service.

The service had implemented an improvement plan which included one main priority to be developed. The plan was now beginning to be evaluated to show progress that had been made. The service should continue to evaluate the improvement plan to highlight progression and it would be beneficial to identify the impact on staff practice, and experiences and outcomes for children.

A quality assurance calendar was in place for each month which identified quality assurance and self-evaluation tasks to be completed to support ongoing development. Monitoring pro-formas were being completed for the monitoring of planning, children's folios, environments, and play. The service should ensure that next steps and actions are being carried out and evaluated within a specific time scale. Management should continue to reflect on and develop opportunities for the staff team to be more involved in monitoring and evaluation of the service to support their professional development. **See area for improvement one.**

Audits of medication and accidents and incidents were being completed. The service should ensure these are correctly dated and signed off. It would be beneficial for the service to further develop these audits. This would support management to identify possible patterns within the accident and incident audit. The development of the medication audit would ensure the safe administration of medication in line with current guidance to maintain children's health and wellbeing needs.

The service encouraged parents to share feedback with them through a variety of methods including Facebook, emails, and questionnaires. Parents had recently shared positive feedback relating to the introduction of stay and play sessions. A parent commented 'We are always asked for honest feedback and are fully involved in any changes.' The service should continue to develop parental engagement and consultations with families and progress their ideas for creating a 'you said, we did' approach. This would provide feedback to families and include them in the ongoing development of the service. Another parent shared 'Involvement is improving but needs more.' The child's voice could be seen through the use of mind maps, this could be further developed throughout the service to ensure that children have ownership of their nursery.

Staff appraisal meetings were being carried out annually with staff. These meetings identified and highlighted strengths, areas for development and training which may be beneficial to support professional development.

Safer recruitment guidance was being followed, and all checks were being carried out and completed prior to new staff members starting work within the service. Induction checklists were in place for newly recruited staff. Management should be mindful of completing these over a longer period of time rather than signing all tasks off during the first day of employment. The national induction resource was now being used to support new staff members. This resource was being completed over a period of several months and the reflective questions were being used to support further development and training.

The service had policies and procedures in place which were regularly reviewed. We asked management to update some of the policies to include links to current guidance.

Areas for improvement

1. To improve practice and outcomes for children, management and staff should continue to formally evaluate the service and further develop a continuous quality assurance system to support the development of the service.

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

How good is our staff team?**3 - Adequate**

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

Quality Indicator 4.3 Staff deployment

Staff were flexible and moved between rooms or areas when required. Staff appeared to work well together, and they knew children well which supported them during interactions and engagement. Staff communicated well and were respectful of each other.

Staff ratios were met throughout the service as a whole; however, management should be mindful of maintaining ratios in each room when movement of staff was taking place. Due to current staffing levels, some children had no choice regarding indoor or outdoor play, and all had to go outdoors at once. Management should also be aware of meeting the needs of their team including newly recruited staff when planning the deployment of staff. Effective management of staff deployment would ensure that the needs of children and staff could be met.

An additional staff member worked over the busier lunchtime period to allow staff members to have their break. Consistent relief staff were also available to support during times of staff absence. This ensured minimal impact for children.

On the whole, staffing was consistent within all rooms which supported effective communications and discussions with parents at hand over times. Management had developed staff communication processes since the last inspection. This supported staff to remain in contact with each other at all times to meet the needs of children.

There was a mix of staff skills and experience to support quality engagement with children. This was currently being developed through support and training from Angus local authority. Management had also attended Care Inspectorate improvement workshops. The manager should continue to develop staff deployment and staff skills to develop and improve positive outcomes and experiences for children. **See area for improvement one.**

Areas for improvement

1. Management should ensure enough staff are working within the service to effectively support the children attending and that their needs are met at all times. This should include, but is not limited to:
 - a) maintaining safe and effective staffing arrangements at all times;
 - b) ensuring staff deployment is effective for supporting consistency for children and families, and high quality outcomes;
 - c) ensuring that staff skills, knowledge and experience is developed through specific training including child protection to support effective staff deployment.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 23 December 2024, the provider must ensure that appropriate and effective infection prevention and control measures are put in place.

To do this, the provider must, at a minimum, ensure that:

- a) the nursery environment is given a deep clean;
- b) toys and resources are appropriately cleaned after use;
- c) effective quality assurance systems are put in place in relation to infection prevention and control;
- d) staff undertake infection prevention and control training.

This is to comply with Regulation 4(1)(a) and (d) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 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 experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment'. (HSCS 5.24).

This requirement was made on 13 November 2024.

Action taken on previous requirement

The service has been deep cleaned. Cleaning schedules are now in place to ensure the environment and resources are cleaned regularly. Quality assurance systems including audits have been developed to monitor the cleaning of the service.

Staff have all completed infection prevention and control training.

Met - within timescales

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 children's health and wellbeing is supported and individual needs met, the management and staff team should ensure detailed information is gathered for all the children. This information should be reviewed at least every six months as is required through legislation with children, parents and carers. Parents should sign and date when plans are reviewed or updated to confirm that the information within the plans is relevant to the child and current.

This is to ensure that 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).

This area for improvement was made on 13 November 2024.

Action taken since then

Personal plans are in place for each child and contain information to ensure staff can fully meet the needs of all children.

Personal plans are being reviewed at least every six months with families and all updates are being clearly recorded and dated.

This area for improvement has been met.

Previous area for improvement 2

To improve practice and outcomes for children, management and staff should formally evaluate the service, put in place an improvement plan and develop a continuous quality assurance system to support the development of the service.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19).

This area for improvement was made on 13 November 2024.

Action taken since then

The service have now created an improvement plan to support ongoing development within the service.

Processes have now been developed to support the self-evaluation of the service. This is in the early stages and will take time to be fully developed and embedded in practice.

This area for improvement has not been met and will be continued within this report.

Previous area for improvement 3

Management should ensure enough staff are working within the service to effectively support the children attending and that their needs are met at all times. To do this they should, at a minimum:

- a) maintain safe and effective staffing arrangements at all times
- b) ensure staff deployment is effective for supporting consistency for children and families, and high quality outcomes

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

'My needs are met by the right number of people'. (HSCS 3.15).

This area for improvement was made on 13 November 2024.

Action taken since then

On the whole the service were meeting ratios, however, staff deployment and movement of staff was leading to children's needs not being fully met and children were not being offered choice.

This area for improvement has not been met and will be continued within this report.

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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.