

Alloway After School Club Day Care of Children

Life Long Learning Suite Alloway Primary School 16 Doonholm Road, Alloway Ayr KA7 4QQ

Telephone: 07857 115 911

Type of inspection:

Unannounced

Completed on:

13 May 2025

Service provided by:

Alloway After School Club Committee

Service provider number:

SP2003001090

Service no:

CS2003005138



About the service

Alloway After School Club is registered as a day care of children service. It is registered to provide a care service to a maximum of 30 children attending primary school. The service operates during term time only. It is located in the lifelong learning suite adjacent to Alloway primary school in Ayr, close to local parks, shops and other amenities. There are 68 children registered with the service, 19 children were present on day one of the inspection, 23 children were present on day two of the inspection and 23 children were present within the breakfast club provision.

About the inspection

This was an unannounced which took place on 12 May 2025 between 14:30 and 18:00 and 13 May 2025 between 15:30 and 18:00. 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. In making our evaluations of the service we:

- gained feedback from xx parent/carers through Microsoft form questionnaires
- gained feedback from xx staff through Microsoft form questionnaires
- spoke with five staff and management
- · 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

- Children benefited from staff who were warm, kind, and caring.
- •To support children's health and wellbeing the snack and mealtime experiences should be further developed.
- •Staff were responsive to children and supported them in developing their ideas through play.
- Families were encouraged to influence improvements within the service.
- •The provider must ensure the appropriate number of qualified and competent staff are working to meet the needs of children.

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?	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?

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

Staff were warm, kind, and caring in their interactions with children. Positive relationships with staff supported children's emotional and wellbeing needs, and staff responded to children's needs using nurturing approaches. Parents told us: "My children feel loved, supported and encouraged" and "Staff are very approachable and caring."

Effective personal plans supported children's wellbeing, ensuring staff caring for children had a clear overview of their individual needs and preferences. These plans were created in partnership with parents, which helped to promote continuity of care for children. Relevant information was included in the plans to enable staff to meet children's individual needs. Parents commented: "I have been asked a couple of times a year to look over and sign the care plan and I can add a comment."

Children were offered healthy snack options and access to drinking water throughout the day, which helped keep them hydrated. Although children were involved in purchasing food for snack they were not encouraged to develop their independence and be involved in the preparation of snacks. Staff did not sit with the children during mealtimes, and there was no designated snack area. We made some suggestions to develop this to support a relaxed, sociable experience for children at mealtimes. Following our last inspection, we made an area for improvement about this. This area for improvement has not been met and has been repeated (see area for improvement 1 under 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Staff had developed positive relationships with families, and parents were invited into the service at pick up. This provided opportunities for staff to pass on relevant information and involve families in their children's play and learning. Parents commented: "Staff are very engaging, want me to have a conversation with them and show me what my child has been up to."

Staff understood their roles and responsibilities to protect children from harm. They had completed child protection training and could confidently tell us how they would respond if they had any child protection concerns. This contributed to keeping children safe.

Quality indicator: 1.3 Play and Learning

Staff were responsive to children and supported them in developing their ideas through play. For example, children enjoyed creating a 'dress to impress' game outdoors with the dressing up materials, and they involved staff in their play. As a result, children were engaged and having fun through play.

The staff respected the children's choices and supported them through consultations to choose from a range of toys and materials suited to their interests; they could ask staff for further toys and materials to support their play. Staff knew children well and rotated resources regularly to support children's ideas and interests.

Staff consulted with children to support play and recorded their ideas within mind maps. We discussed with the manager how this could be further developed. For example, staff implementing planned experiences from these consultations would support and further develop children's ideas and preferences. This would enhance children's play experiences and promote more positive outcomes for children.

Children were supported in developing their literacy and numeracy skills, for example, through discussions with children, access to a range of books, and using problem solving through experiences, such as modelling with straws and shapes. This included considering children's ideas and comments and learning from their experiences. As a result, children were developing well.

Staff were looking at ways to further support children's outdoor play experiences and were in the process of sourcing more loose parts. Loose parts are materials that can be moved, redesigned, and used in multiple ways. The service should continue to develop loose parts play and materials. This would further support children in developing their curiosity, imagination, creativity, and problem solving skills.

Children were encouraged to develop their ideas and be creative through play experiences. They had access to some loose parts, such as a variety of large pieces of material, which supported their creativity and imagination. Loose parts are materials that can be moved, redesigned, and used in multiple ways. The service should continue to develop loose-parts play and materials. This would further support children in developing their imaginations and problem solving skills.

Staff worked in partnership with the local library and supported children in developing their skills through innovative ideas. For example, children recycled old books from the library and made animals from them, which supported children in developing skills for lifelong learning as they learned about recycling materials.

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

Children had access to a warm, welcoming environment. Various resources, including a teepee and foam shapes, enabled children to rest and relax. Tables, chairs, and some open floor space supported individual and group play opportunities, promoting choice and independence.

Although children did not have access to free flow outdoor play experiences, they mostly played within the outdoor area during our visit. Staff and children had developed a trolley of resources to take outdoors, and staff told us they frequently used the outdoor space. This gave children regular access to fresh air and supported their wellbeing.

Staff worked effectively as part of a team and supported each other to ensure appropriate supervision of children. They kept accurate daily registers of children attending the service. A secure boundary fence and lockable gate in the outdoor area also helped keep children safe. However, we noted some occasions when the doors were left open. For example, when children were arriving at breakfast club and when all children were going outdoors. This increased the risk to children. We raised this with the manager who took immediate action to secure the doors. We were satisfied with the action taken to ensure children's safety. Parents commented: "The space outdoors is great and safe."

Inspection report

Some infection prevention and control procedures kept children safe. For example, the environment and resources were safe and clean for children to access. Children were encouraged to wash their hands at key times, such as before eating. This reduced the spread of infection and kept children safe.

Risk assessments supported staff in reducing risks to children. Although outing risk assessments had been created, we asked that the service review these and discuss and record the risks involved with each outing with children. This would help children identify risks and stay safe.

The service had good links within the local community. They regularly took part in events within the local library and visited local parks, and their links with the school supported children's transitions. This helped children become familiar with their local and wider environment.

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 improvements are led well

The service had made improvements since the last inspection and had implemented a self-evaluation process linked to the areas for improvement highlighted. They also used the Care Inspectorate's 'A quality framework for daycare of children, childminding and school-aged childcare' to support this. These improvements were evident in daily practice. For example, they reviewed the way they record information on children within their personal plans to enable them to ensure they accurately reflected children's individual needs and how they would be supported. Although management had completed these and communicated their findings to staff. We discussed with the manager that all staff should be included in the self-evaluation process to ensure everyone is included and can contribute to improvements. This would support more positive outcomes for children.

Families were encouraged to influence improvements within the service in a range of meaningful ways. For example, recent feedback from parents suggested implementing a 'homework club.' Staff and children were looking at ways to implement this. A closed Facebook page enabled parents to see what their children had been engaging in and provided an opportunity to give feedback and further discuss these experiences with their children. This supported parents in being meaningfully involved in improvements within the service. Parents told us: "The updates on Facebook are always fun to see and read what the children have said. "Both my child and I get questionnaires to fill out" and "The staff are always asking for our views on all activities on the Facebook page."

Children were encouraged to record their ideas and opinions about aspects of the service, and children told us, "We have a suggestions box; we can put our ideas in there." Staff responded to children's ideas by writing about the requests when they were implemented or explaining reasons why they could not be. We discussed with the manager how this could be further developed to support children's ideas to be implemented in other manageable ways through further discussions with children. This would further develop children's ideas and opinions.

Some quality assurance and monitoring processes supported children's well-being. For example, audits of accidents and incidents provided staff with the relevant information to make improvements and keep children safe. Although monitoring of practice had been started, this had not impacted areas for improvement, which were highlighted throughout the inspection. We asked that the manager develop

monitoring processes to ensure they are meaningful and effectively highlight areas for improvement. This would support continuous improvement of the service.

Staff used opportunities when the children were not present to discuss key aspects of the service. However, it was not evident what impact these discussions had on the service as no minutes of these meetings were kept. We discussed with the manager, ensuring they minute these meetings accurately reflecting discussions. This would support all staff in receiving updates, clearly understanding developments within the service, and supporting a consistent approach.

The manager participated in the local childcare forum, where they met with other services to discuss training opportunities, recurring themes, and share practice. This supported the manager in improving areas of the service and providing better outcomes for children.

How good is our staff team?

3 - Adequate

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

Quality indicator: 4.3 Staff Deployment

Staff worked well as a team and communicated well when tasks took them away from their responsibilities, ensuring appropriate supervision of children.

The manager supported staff through annual one-to-one meetings, during which they had the opportunity to discuss their strengths and areas for improvement. The manager had recently reviewed the format of these discussions to ensure they could fully support staff in developing their knowledge, and skills. We discussed having more regular reviews to allow staff to discuss their progress towards meeting their targets and to identify any support needed.

New staff were supported through ongoing consultations with the manager and a formal discussion after three months of deployment. This helped new staff understand their role, set clear expectations and helped identify any areas for improvement.

Staff had completed training to support development within their role. They had kept their own records of training, but it was not evident what impact this had on practice. We suggested that the manager kept an overview of staff training evaluations. This would enable them to consider the impact that training had on practice and ensure that future training had a positive impact on experiences for children.

Staff were mostly deployed appropriately throughout the service to meet the needs of children. However, for a period of time during the morning session, there were not enough staff deployed to care for children. Appropriate checks had not been carried out for volunteers within the service to ensure their suitability for working with children. This put children at risk. As a result, we made a requirement about this (see requirement 1).

Requirements

1. By 9 June 2025 the provider must ensure that children are kept safe. To do this, the provider must, at a minimum:

Inspection report

- a) ensure the appropriate number of qualified and competent staff are working to meet the needs of children.
- b) ensure that all staff and volunteers are safely recruited.
- c) Ensure clear roles and responsibilities are identified for staff and volunteers.

This is to comply with section 7(1) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am confident that people who support and care for me have been appropriately and safely recruited" (HSCS 4.24)

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 children's health and wellbeing, the provider should improve snack and mealtime experiences. This should include but not be limited to:

- a) ensuring adequate supervision while children are eating;
- b) ensuring mealtimes are relaxed, unhurried and sociable; and
- c) providing children with opportunities to develop their independence, for example by serving their own snacks and pouring their own drinks.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 2 February 2024.

Action taken since then

Snack time had not been improved to support a relaxed, unhurried social experience for children. Children were not provided with opportunities to develop their independence and staff did not consistently sit with the children providing adequate supervision while children were eating. Therefore, this area for improvement has not been met and has been repeated as part of this inspection.

Previous area for improvement 2

To support children's physical and emotional wellbeing, the provider should increase opportunities for children to access the outdoor environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

This area for improvement was made on 2 February 2024.

Action taken since then

The children had access to the outdoor area with a range of resources to support them to develop their imaginations and support their physical and emotional wellbeing. The service had made up boxes of outdoor resources and loose parts and were sourcing more loose parts to further support children's outdoor experiences. Therefore, this area for improvement has been met.

Previous area for improvement 3

The provider and manager should establish robust, regular and systematic quality assurance processes to recognise achievements and identify key next steps in development.

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 2 February 2024.

Action taken since then

Quality assurance processes had been developed to successfully identify key next steps in development and support continuous improvement. Therefore, this area for improvement has been met.

Previous area for improvement 4

The provider and staff should access training sessions to further increase their knowledge of the play process. Staff should be supported and encouraged to reflect on how the training they have attended impacts on the service, the children and/or their families.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 2 February 2024.

Action taken since then

Staff had engaged in further training to support them to develop their knowledge and skills. They kept a review and evaluations of training undertaken to evaluate how his would support them in their practice. Therefore, this area for improvement has been met.

Previous area for improvement 5

The provider, manager and staff, should ensure that all children have a detailed personal plan that sets out how their health, welfare and safety needs will be met. Personal plans should be developed in partnership with children and parents and should be reviewed and evaluated at a minimum of six-monthly intervals or sooner where required.

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).

Inspection report

This area for improvement was made on 2 February 2024.

Action taken since then

Personal Plans had been reviewed and developed and they supported children's overall health and wellbeing needs. Personal Plans had been reviewed regularly to ensure staff had up to date information for children to support their individual needs. Therefore, 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?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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