

Bright Horizons Renfrew Early Learning and Childcare Day Care of Children

David Lloyd Leisure Club Arkleston Road Renfrew PA4 ORA

Telephone: 0141 4651874

Type of inspection:

Unannounced

Completed on:

14 May 2025

Service provided by:

Bright Horizons Family Solutions Ltd

Service provider number:

SP2003000319

Service no: CS2017355536



About the service

Bright Horizons Renfrew Early Learning and Childcare is a daycare of children service. The service is registered to provide a care service to a maximum of 52 children at any one time aged from birth to those not yet attending primary school, of whom no more than 36 are aged under 3 years of whom no more than 17 are aged under 2 years.

The service is provided by Bright Horizons Family Solutions Limited and is located within the David Lloyd Leisure Club in Renfrew. It is located close to local shops, other amenities and transport links. Care is provided from a building consisting of three playrooms, an office, kitchen, staff room, and laundry facilities. Children can access outdoor play in the secure nursery gardens.

About the inspection

This was an unannounced inspection which took place on Monday 12 May 2025 and Tuesday 13 May 2025. The inspection was carried out by three early learning and childcare 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:

- spoke with and observed children using the service
- spoke with 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

- Most children were happy and confident throughout the inspection.
- Children played together and friendships were being developed
- Children experienced a caring and nurturing setting as good working relationships had been established between the team, senior management, and families.
- Personal plans should be updated to reflect children's current health, welfare and safety needs, hold accurate information and include strategies and next steps.
- Mealtimes within the 3-5-year-old room should be developed to support positive experiences and a homely environment.
- There was a noticeable lack of provocations to spark curiosity and imagination, indoor and outdoor areas were sparse and lacked sufficient resources.
- We found areas of the environment that required attention to support a safe and clean environment.
- Quality assurance needs to be more firmly embedded into the process of evaluating and improving the nursery as a whole.
- The provider should review the current staff deployment to improve the continuity of care, play and learning for children and to support staff.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	3 - Adequate
How good is our setting?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	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

Quality Indicator: 1.1 - Nurturing care & support

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

Interactions between staff and children were kind, caring and nurturing which supported children's overall wellbeing. Most children were happy and confident as staff engaged and played with children at their level. Most children were offered cuddles and reassurance when they were upset or unsure about a situation. This was supporting most children to feel safe and secure during their time at the service. Parents told us:

'The staff really are the heart of nursery for my child. She/he adores their key worker, who always makes them feel special and heard.'

'The staff are extremely warm and caring.'

Staff communicated daily with parents at collection and drop off times and through the service's online family app. Parents told us

'The daily handover is always good, and I never feel like I am being hurried along. The staff always make time to answer any questions I may have..'

'There is always an open dialogue between us and the service to discuss any aspect of my child's care and learning.'

We sampled personal plans and found that they gathered information about children's health, welfare and safety needs and some key information to support staff in their daily care, play and learning. However, we could not clearly identify some children's current play or learning needs including strategies and next steps. Management and staff should now review and streamline the information being gathered to ensure all children's plans are up to date, hold accurate information and include strategies and next steps. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1)

We sampled medication held in the service along with the consent forms. We found that medication was being stored in line with best practice guidance. However, the service's policy and medication records including some information recorded was not in line with current best practice guidance. We highlighted this on day one of the inspection. On day two the service provided an organisational updated policy and recording templates. We have asked that the appropriate paperwork and policy are implemented as a priority to ensure staff and parents have the most accurate information in line with current best practice quidance 'Management of Medication in Day care and Childminding Services'.

Most children were supported to sleep at a time that was suitable to their needs in line with parents' preferences or routines, individual mats, sleep sheets and comforters were provided in an environment that supported children to rest and relax. However, we identified that in the 3-5 room staff were not always aware when children had fallen asleep or when they were showing signs of requiring a sleep. To support children to rest and relax at a time that suits their needs staff should ensure they are aware and observant of all children's individual needs.

Management and staff should also revisit safe sleep guidance which can be found at safesleepscotland.org.

Meals provided were nutritional and catered for children's dietary requirements. Most children ate the lunch and snacks provided. Parents told us:

'The food and snacks on offer are healthy and varied, and my child can help themselves and decide what they put on their plate, staff support my child with this.'

'The nursery offers a great variety of food and has allowed my child to try lots of different things.'

During the inspection we observed the lunchtime experience over two days. We found staff were supporting children with self-help skills, providing opportunities to develop some independence and involving children in setting up and clearing away. Mealtimes within the under 3-year-old rooms were calm, homely and staff were supporting children to be independent, engaging in and developing conversations which was supporting children to have a relaxed and positive mealtime.

However, in the 3-5 room we observed lunch time to be disorganised, and some children's individual needs were not supported. This was not a positive, enjoyable experience for some of the children present. We discussed the lunch experience and environment within the 3-5 room and suggested re locating the tables, developing an environment that is homely and enables staff to focus on delivering a positive lunch and snack experience. (See area for improvement 2)

Quality Indicator: 1.3 - Play & Learning

Most children were busy with the resources on offer and having fun. Some children played together happily, and friendships were being developed. Staff had created some areas of interest to engage children's imagination and develop their language, literacy, and wellbeing, for example, block play, sand, water and the home corner. Staff encouraged children to engage in stories, singing and dancing. Children in the 3-5 room enjoyed playing outdoors with the bikes and water the children in the under 3-year-old rooms went for walks in the prams and out to discover the forest area.

However, the quality and range of play experiences for children varied throughout the service. There was a notable lack of provocations to spark curiosity and imagination. Indoors and outdoor areas were sparse and lacked sufficient resources, this impacted the overall quality of the experiences on offer. Overall, there was limited evidence of children leading their own play. Not all children experienced learning opportunities that were relevant, personalised, or sufficiently challenging for their developmental stages. This resulted in missed opportunities to support children's creativity and choice in their play. To support and enable children to have fun and learn through more purposeful, high quality play experiences, strands of learning should be developed from and linked to children's ideas and interests.

When sampling the planning processes that were in place, along with children's individual learning journals, we found it was difficult to identify a clear progression pathway, and the next steps identified to support children's play and learning. The service should review their current approach to children's progress and ensure planning is more individualised and responsive, based on children's interests and reflecting their choices.

Staff should continue to develop online learning journals to reflect children's development, progress, and current areas of interest. These should be supported with quality observations. Management should support staff to record quality observations and next steps that are relevant and personal to children's stage of

development and interest. Staff would benefit from training and additional time to gain confidence in recording and documenting children's progress and learning.

Staff should continue to build as a team on their experience and expertise to fully meet children's needs through high quality interactions and observations, this includes extending children's thinking and widening their skills to support them in developing their interests, leading on their play, and learning. Staff within the under three rooms would benefit from training and implementing the 'Being Me Under Three framework.' this resource would support staff's knowledge, confidence and enhance planning approaches for very young children.

The staff's understanding of child development and schemas varied across the setting. We would encourage the manager and staff to take account of children's developmental age and stage of learning when planning experiences for children. This will further ensure that all children are supported to reach their potential. (See area for Improvement 3)

Areas for improvement

1. Staff should continue to develop and implement robust personal plans and learning journals for children. They should ensure that, in consultation with parents that children's individual needs, wishes and choices are recorded and that clear plans are in place to monitor how they plan for, record and report upon children's progress and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My future care and support needs are anticipated as part of my assessment.' (HSCS 1.14) and 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS1.15)

2. To improve outcomes for children to have a positive, engaging and quality lunch and snack. The management team along with staff within the 3-5 room should develop the environment, consider the deployment of staff and create a homely, calm and sociable mealtime experience that supports positive outcomes for all children.

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)

3. To support children to achieve their full potential the manager and staff should review the current planning cycle to include high quality observations and next steps, with a focus on children's developmental stages. This will ensure that children are supported to lead their own play and learning that is tailored to their individual abilities and needs. This should include but not be limited to staff undertaking training to support them in providing quality provocations and experiences, planning, high quality observations, meaningful next steps and evidence of progression in learning.

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 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 'My care and support meets my needs and is right for me' (HSCS 1.19).

How good is our setting?

3 - Adequate

Quality Indicator 2.2 Children's experience high quality facilities.

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

The nursery was warm and welcoming, and visitors were greeted at the reception area where there was an expectation they signed in and out of the service. Furniture was child sized and there were some soft furnishings for relaxation and comfort for children to rest. Children had some space to play in small groups and by themselves. Staff were using facilities out with the nursery to enhance children's needs and experiences for example, the forest area, soft play, swimming, and the squash courts within the David Lloyd centre. This was supporting children's choice and individual needs. Parents told us:

'Children have access to an outdoor forest which the children have been helping organise and exploring nature.'

'Children go on pram walks and play in the forest area.'

Staff and children were implementing some appropriate infection prevention and control practices, through hand washing before lunch and snack. However, we did have to prompt staff on more than one occasion when children had dirty noses or when they required their face and hands to be washed after lunch or snack. We discussed with management monitoring infection prevention and control practices as part of their quality assurance moving forward. This should include monitoring staff knowledge and practice on the appropriate use of personal protective equipment (PPE) we asked the service to review their nappy changing procedures. We would also ask staff to model good hand washing after returning from the garden to support good infection prevention and control practice. This will support staff and children in reducing the spread of any infection.

We found areas of the environment required attention to support a safe and clean environment for example the sink areas, edges of units and seals along the floor as they had exposed porous areas. We also highlighted the fan in the baby room nappy changing area wasn't working, and the outdoor areas for all children require upgrading. We would ask the provider to review and carryout appropriate maintenance to ensure the environment is safe and clean for children and staff.

We found observations or health and safety checks of the playrooms and garden were not supporting a safe and stimulating environment for children for example, storage of materials within the toilets, cluttered areas throughout, children's dummy storage and sleep mats that were burst. We also identified that the baby room did not have appropriate ventilation which was a concern. Throughout the nursery the environment would benefit from being refreshed to support safety and good infection prevention and control measures. (See requirement 1)

We identified a lack of respect for some resources especially outdoors and the disorganisation of some areas inside and outside the nursery. As a result, we observed some children who were dysregulated and unable to engage in purposeful play and learning. We asked for this to be highlighted to staff with a focus on their role and responsibility of role modelling to support children's understanding in respecting and caring for their environment. Management and staff should look at creating an environment that is respected, inspires children's imagination and creativity with a focus on loose parts play and natural and open-ended resources. (See area for improvement 1)

The outdoor enclosed garden area was shared by all children in the service. During the inspection children in the 3-5 room were accessing outdoors regularly. However, the quality of resources and experiences were limited, and we identified a number of infection prevention and control concerns. We also identified the areas for the under three-year-old children were not suitable and required upgrading. Management did advise the service is planning to upgrade the garden to support all age ranges. Staff caring for the under three children told us they use the forest area or take the children out in the prams to ensure they have some access to outdoors. The provider and manager should ensure that all children have an appropriate safe, clean space outdoors to play and learn and the option to play outdoors at a time that suits their needs. (see requirement 1)

We sampled accident and incident records and asked management to audit these to identify common or reoccurring concerns. This should include any actions in relation to the environment, resources, and individual children.

Requirements

- 1. By 3 October 2025 children must be cared for in a safe and well-maintained environment. Maintenance of the building and repairs must be carried out to ensure that children experience a high-quality environment and staff have required training, knowledge and understanding. The provider must, at a minimum, ensure
- a) there are plans in place to repair and upgrade the outdoor areas in line with best practice guidance
- b) carryout maintenance required throughout the nursery including fixing the fan in the baby room changing area, implementing appropriate ventilation in the baby room.
- c) ensure staff are knowledgeable and competent in infection prevention and control guidance and procedures.
- d) ensure the environment is clean, tidy, and well-maintained including attention to the sink areas, edges of units and seals along the floor and refresh areas to support a more aesthetically pleasing environment.
- e) quality assurance processes are in place to monitor the effectiveness of infection prevention and control practices.

This is to comply with Regulation 10 (2)(a)(d) (fitness of premises) of the Social care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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).

Areas for improvement

- 1. To support positive outcomes and improve children's play experiences management and staff should:
- Create an environment that is nurturing, respected, inspires children's imagination and creativity with a focus on loose parts play and natural and open-ended resources.

- Provide children with more challenge, to discover, promote their curiosity and imagination, their sense of wellbeing, wonder and adventure.
- Review the layout of children's play spaces indoors and outdoors with a view to creating more space with better areas and opportunities for children to play, learn and choose resources.

This is to ensure that 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).

How good is our leadership?

3 - Adequate

Quality Indicator: 3.1 Quality assurance and improvement are well led.

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

We found the management team and staff engaged well during the inspection process, taking on advice and support, demonstrating a commitment for improvement.

Parents were welcomed into the service at collection and drop off times, staff took time to feedback to parents when children were returning home. The service was encouraging parents to have an active role in the service through their online profile app. Parents had visited as part of people who help us topics, international month and stay and play sessions where parents were reading to the children, dancing, and participating in outdoor play. This was supporting parents to have positive links with the children and the service.

We found management had developed an improvement plan identifying some service priorities. For example, implementation of eco schools, parental communication, and community partnership and raising the attainment of children's progress. Management had been using the plan, do, study act, (PDSA) models to support the team to identify where improvements are required for example developing snack and lunch time experience. However, the improvement plan did not reflect the services under three-year-old provision, and we found the processes that were in place were not yet regular or robust enough to ensure procedures were consistently followed or to secure sustained improvement.

Quality assurance now needs to be more firmly embedded into the process of evaluating and improving the nursery as a whole. Where there was evidence of monitoring and evaluation being carried out, we did not see the impact of actions that were identified. Monitoring of the nursery environment, staff practice and engagement requires to be more rigorous. This will help to ensure positive outcomes for all children. (See area for improvement 1).

Staff were safely recruited through the organisation following best practice guidance 'Safer recruitment through better recruitment' all safer recruitment checks were undertaken prior to staff starting in the service. Staff were registered with Scottish social services council (SSSC) and newly appointed staff were supported as part of their induction. This supported the safety of children, families, and staff.

Staff and management were confident when discussing how to keep children safe and how they would action their child protection procedures. As a result children and families were safeguarded and protected.

Areas for improvement

- 1. To improve the quality of care, learning and experiences for children, the provider should ensure that effective quality assurance, self-evaluation and improvement plans are in place that identify strengths and areas for development, and support continuous improvement of the service. This should include, but not be limited to:
- a) developing an improvement plan that reflects all ages of children.
- b) carrying out regular and effective monitoring of the environment, personal plans, and staff practice to support positive outcomes for children.
- c) regularly and meaningfully seek the views of children, parents and staff which should be used to support positive outcomes for children and families.

The Care Inspectorate's guidance, 'Self-evaluation for improvement - your guide' and the use of a self-evaluation framework would support this process.

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

Quality Indicator 4.3 Staff deployment

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

Staff engaged well in the inspection process. They were open and honest during discussions. Children experienced a caring and nurturing setting as good working relationships had been established between the team, senior management, and families. We found staff worked well together within the nursery. They were respectful in their interactions with each other, creating a positive ethos for children and their families. Staff told us they felt supported by management and could approach and gain support when required. The staff team spoke of their recent accomplishment where they completed the kilt walk and how they enjoyed taking part in positive team building. As a result, the team worked well together focusing on delivering positive outcomes for children and families. Parents told us:

'Staff are welcoming and friendly nursery teachers who have a great bond with my child, he/she is happy being dropped off and on pick up.'

'Staff are lovely and extremely helpful.'

'The staff are all very welcoming and make my child feel settled and happy when going into the classroom.'

Most staff communicated well with each other across the day. We saw examples of staff being flexible in their deployment when their colleagues asked for help. For example, when changing children, supporting children to sleep or self-regulate. However, we found within the 3-5 room there were occasions when supervision of children's engagement with each other could be improved. We found at times the approach to staffing within the service was not outcome focused. At points across the day there was gaps in specific skills needed to support high quality opportunities for children. For example, during staff breaks, staff became task orientated. As a result, some children's needs were not being met and opportunities for children at this time were limited. To improve the continuity of care, play and learning for children and to support staff deployment, we would ask the provider to review the current system in place to support staff deployment, individual children, and the consistency of the staff team (see area for improvement 1).

Areas for improvement

1. To improve better outcomes for children and families the provider should support the management and staff team in supporting the continuity of care, play and learning for children. We would ask the provider to review the current system in place to support management with staff deployment, individual children's care and support needs, and the consistency of the staff team.

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 is consistent and stable because people work together well' (HSCS 3.19).

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

Staff should continue to develop and implement robust personal plans, and learning journals for children. They should ensure that, in consultation with parents that children's individual needs, wishes and choices are recorded and that clear plans are in place to monitor how they plan for, record and report upon children's progress and development.

Health and Social Care Standards: 1.14 - 'My future care and support needs are anticipated as part of my assessment.' 1.15 - '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.'

This area for improvement was made on 19 September 2019.

Action taken since then

We sampled personal plans and found that although they gathered information about children's health, welfare and safety needs and some children with individual educational plans held key information to support staff to provide the right care, support and play and learning needs and strategies. However we could not identify clearly some children's current play or learning needs including strategies and next steps.

Management and staff should now review and streamline the information being gathered and ensure all children's plans are up to date, hold accurate information and include strategies and next steps this area for improvement will be repeated.

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

4.3 Staff deployment

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
1.3 Play and learning	3 - Adequate
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our loodership?	2 Adequate
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	3 - Adequate

3 - Adequate

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