

Kidz 'R' Us Out of School Hub Day Care of Children

Craigmount School Community Wing Craigs Road Edinburgh EH12 8NH

Telephone: 07496688327

Type of inspection:

Unannounced

Completed on:

15 June 2018

Service provided by:

Laing, Suzanne

Service no:

CS2017355023

Service provider number:

SP2010979304



About the service

Kidz 'R' Us Out of School Hub registered with the Care Inspectorate on 28 September 2017.

Kidz 'R' Us Out of School Hub is provided by Suzanne Laing. The service operates from Craigmount School Community Wing and is registered to provide a care service to a maximum of 16 children at any one time aged from four years to currently attending primary school of whom no more than three are not yet attending primary school.

The stated aims of the service are:-

- '- Provide structured creative and stimulating activity for primary school children out of school hours.
- Offer a safe and comfortable environment so children can grow and develop.
- Compliment the work of formal education by offering a safe space to complete their homework and other school related activity.
- Transport will be offered to ensure the children are picked up and dropped off at school in the safest way'.

Following information we received through other regulatory activity, we issued a serious concerns letter to the service on 29 May 2018 with three requirements made. These were in relation to ensuring that effective safer recruitment policies and procedures were in place and that staff employed are suitably skilled and experienced to carry out their role. We carried out an unannounced inspection of this service on Thursday 14 June 2018 and the inspection continued on an announced basis on Friday 15 June 2018. We followed up on the requirements made and were satisfied with the information provided to us that these had been met. Feedback about the inspection was given to the provider and manager during the inspection.

The Care Inspectorate is committed to improving the health and wellbeing of all children receiving a care service. We want to ensure they have the best start in life, are ready to succeed and live longer, healthier lives.

We check services are meeting the principles of Getting it right for every child (also known as GIRFEC). Set up by Scottish Government, GIRFEC is a national approach to working in a consistent way with all children and young people. It is underpinned by the principles of prevention and early intervention. This approach helps services focus on what makes a positive difference for children and young people – and what they can do to improve. GIRFEC is being woven into all policy, practice, strategy and legislation that affect children, young people and their families.

There are eight wellbeing indicators at the heart of GIRFEC. They are: safe, healthy, achieving, nurtured, active, respected, responsible, and included. They are often referred to as the SHANARRI indicators. We use these indicators at inspection, to assess how services are making a positive difference for children. Information on SHANARRI can be found at: http://www.scotland.gov.uk/Topics/People/young-People/gettingitright

What people told us

Some children told us about the activities and resources which made their time at the service fun. Children enjoyed a variety of activities and experiences available to them which included arts/crafts, console games, board games, Lego, dancing and party games. We saw that children were confident and content within their environment and with their interactions with staff.

We sent five care standards questionnaires to the service to give to distribute to parents. However the provider

told us that there had been a delay in receiving these and therefore at the time of the inspection none had been returned to us yet.

We spoke to several parents during the inspection and they were very complimentary about the staff, experiences and care and support that their child received.

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their improvement plan and quality assurance paperwork. These demonstrated their identified priorities for development and how they were monitoring the quality of the provision within the service.

From this inspection we graded this service as:

Quality of care and support3 - AdequateQuality of environment3 - AdequateQuality of staffing3 - AdequateQuality of management and leadership3 - Adequate

Quality of care and support

Findings from the inspection

Children were welcomed and cared for by staff and this helped them to be confident and comfortable in the service. Staff had been trained in child protection and they were confident of the procedures to follow in the event of having any concerns about children in their care.

Registration forms were used to gather information from parents about children's care needs with regular discussion with parents to help keep staff informed and have an understanding of children's needs. However there was a risk that information could be missed as children's personal plan information was not reviewed or updated at least once every six months. Action was needed to address this and develop personal plan information in consultation with parents. This was to include documenting the stepped approaches to be taken by staff to support any medical conditions, allergies or other support needs. (See recommendation one).

Staff were respectful and nurturing in their interactions with children and provided support when needed during their play experiences. Children clearly knew the routine of the service and were supported to make choices and requests to further meet their needs. Information from children was taken then into account when planning for activities and experiences and this showed that staff valued their opinions. To keep children and parents better informed, activities and planned experiences should be routinely shared.

Staff promoted positive behaviour strategies and children were reminded of the boundaries to maintain safety and consideration for others. This approach helped support children's self-esteem and confidence. The behaviour policy should be updated to reflect their practice and to outline the support strategies and stepped approach to be taken in the event of any concerns arising.

Children were supported to learn about healthy lifestyles through encouraging them to wash their hands prior to eating and after going to the toilet. Snack was provided on a daily basis and this was an opportunity for children to learn life skills by serving themselves and to be able to socialise with their peers. Further action was needed to improve upon the snack provision in line with best practice. This can be found at www.hub.careinspectorate.com. The menu was due to be displayed for information for families. In addition, to ensure children's safety, staff should ensure that children are seating when consuming foods. (See recommendation two).

As part of a general permission form, parental authorisation was sought for medication to be administered to children. This was not in line with best practice. To ensure the safety and wellbeing of children, further action was needed by the service to update the medication policy and procedures in line with best practice document 'Management' of Medication in Daycare and Childminding Services'.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

- 1. To support children's health and wellbeing needs are ensure that staff have up to date information, children's personal plans should be reviewed and updated a minimum of once every six months in consultation with parents. This should include documenting the stepped approach to be taken by staff to support any identified allergies, medical or other support needs. This is to ensure care and support is consistent with the Health and Social Care Standard (HSCS) 1.15 which states My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices.
- 2. To support children to have healthy choices with opportunities to be independent and learn life skills, the snack routine and menu should be improved in line with best practice. This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) 1.33 which states that I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning.

Grade: 3 - adequate

Quality of environment

Findings from the inspection

Parents and visitors had to be given access to the building by staff via the secure entry system. This helped to ensure that children were kept safe.

The indoor environment was well maintained and staff carried out daily risk assessments of the areas used to help ensure children's safety. In the event of any concerns, the service reported these to the landlord to address. To further safeguard children, the daily risk assessments carried out by staff needed to be developed as there were some missed opportunities to identify potential issues with the environment. This included the temperature of the water for handwashing in the main toilets, ensuring blind cords were secured and to assess areas that had been used by other groups. General risk assessment information should also be developed to

include information about transport arrangements to support the safety of children from school to the service. For example the appropriate checks carried out for vehicles used and ensuring suitable car seats available. (See recommendation one).

Children's needs and interests were met through a variety of play opportunities including outdoor play and outings. Children had developed a photograph book to outline their key experiences which demonstrated that community links had been established with outings to local businesses and a visit from the Fire and Rescue Service.

Several rooms were available for use by the service with different types of play were offered in each of these rooms as well as a designated sensory space. Current staffing levels and deployment of staff meant that children's choices, room use and access to some resources were limited at times. Opportunities for children could be improved through the better planning of space used, staff and resources. Rooms to be used should be set up prior to children's arrival with the room layout being adapted to present resources in defined areas that cater for the varied age ranges. The use of best practice documents should be used to support the setting up of the play areas to support positive outcomes for children assist them to use the environment more purposefully. For example, developing Loose Parts play would support children's imaginative and creative play. (See recommendation two).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

- 1. To further safeguard children, further action should be taken to improve upon the risk assessments of the environment including the transport arrangements from school to the service. This is to ensure the environment is consistent with the Health and Social Care Standards (HSCS) 5.17 which states My environment is secure and safe.
- 2. To support and enhance opportunities and experiences for children, action should be taken through better planning of spaced used, staffing and resources. Action should be taken to set up and adapt the designated rooms prior to children's arrival taking into account the varied aged range of children attending and the presentation of resources in defined areas. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 2.27 which states 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 for my age and stage, which stimulate my natural curiosity, learning and creativity.

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

Staff were respectful in their communication with parents and children and were knowledgeable of the importance of involving and consulting them to meet children's interests and care needs.

Staff were committed to providing quality care to the children and to continue with their own professional development to facilitate this. Staff worked well together to support each other to complete routines throughout the session. Children were clearly comfortable in approaching staff when they needed to or to involve them in their play. This demonstrated that children had positive, secure attachments with staff.

Not all staff had been recruited in line with safer recruitment best practice or registered with the Scottish Social Service's Council (SSSC). As stated in the 'About the Service' section of this report, we had issued a serious concerns letter to the service. We followed up on this as part of the inspection and we were satisfied that with the action taken by the provider to address the requirements made. The safer recruitment policy had been updated to reflect safer recruitment practice the provider and manager were now fully aware of their responsibilities when employing staff in order to safeguard children. To demonstrate their recruitment practice, a checklist should be developed to outline the processes carried out prior to staff employment. An induction process should also be developed to ensure that key information as well as policies and procedures are shared with new staff. This would ensure that staff were fully aware of their role and responsibilities to support positive outcomes for children. The provider and manager told us that to facilitate this, staff policies were currently being developed. (See recommendation one).

Regular staff meetings took place between the manager and provider and we discussed that a record of these should be kept for future reference. Plans were in place to carry out annual appraisals to help identify staff training needs and assess practice. Providing support and supervision sessions throughout the year would provide further support for staff in their role and help monitor their progress with their development and training. We will follow this up at the next inspection.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. To ensure the safety and wellbeing of children, systems should be developed to demonstrate that safer recruitment and induction processes have been carried out prior to employment. This is in order to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) 4.24 which states I am confident that people who support and care for me have been appropriately and safety recruited.

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The manager and provider worked closely together to deliver the service. They had a clear vision for the expansion and future of the service. A development plan outlined the achievements and progression of the service so far and further work was needed to update this to outline planned improvements for the service and the action to be taken to progress these.

The manager and provider were reflective of their practice during the inspection and described their plans to develop their systems to support their practice. To assist with the improvement agenda of the service, we directed the provider and manager to a number of best practice documents available on our website to support them with their knowledge and practice. It would be beneficial for them to keep a record of the best practice documents that have been used and to outline any action taken or planned as a result.

There was a lack of quality assurance processes and regular monitoring of the service would help the provider and manager identify where improvements were needed to support positive outcomes for children. Quality assurance processes could include observations/assessments on staff practice, the general daily routine, environment, reviewing of children's personal plan information, monitoring of staff SSSC registration. This may help the service to identify where further support, training or any action was needed. (See recommendation one).

The policies and procedures for staff were currently being developed to outline clear information and support consistency of practice. We discussed that the policy information provided to parents should also be updated to reflect the correct information and practice in line with best practice. This included the complaints policy, medication policy and child protection policy. As the service was registered to care for three children not yet attending primary school, the aims and objectives needed to be updated to also reflect this age range. We will follow this up at the next inspection.

Information about the service was displayed in the foyer. The provider advised that feedback from families had been positive and questionnaires had been used to gather feedback about the settling in process and the service in general. Plans were in place to document any action taken as a result of any suggestions or comments received.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. To improve upon outcomes for children, further quality assurance systems should be developed to assess the quality of the provision in line with best practice. This is to ensure care and support is consistent with the Health and Social Care Standard (HSCS) 4.19 which states I benefit from a culture of continuous improvement, with the organisation having robust and transparents quality assurance processes.

Grade: 3 - adequate

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

This service does not have any prior inspection history or grades.

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