

# The Octagon Kidz Club (The OK Club) Day Care of Children

Claremont Parish Church  
High Common Road, St Leonards  
East Kilbride  
Glasgow  
G74 2AU

Telephone: 07860114838

**Type of inspection:**

Unannounced

**Completed on:**

17 February 2020

**Service provided by:**

The Octagon Kidz Club

**Service provider number:**

SP2004006937

**Service no:**

CS2003043295

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

We are committed to improving the health and wellbeing of all children receiving a care service to ensure they have the best start in life, are ready to succeed and live longer, healthier lives. The Care Inspectorate has an important role to play in supporting this approach in inspecting care services for children.

The Getting it Right for Every Child (GIRFEC) approach is underpinned by the principles of prevention and early intervention. It is a consistent way for people to work with all children and young people. The approach helps practitioners focus on what makes a positive difference for children and young people and how they can act to deliver these improvements. Getting it Right for Every Child is being threaded through all existing policy, practice, strategy and legislation affecting children, young people and their families.

In Scotland, the Getting it Right for Every Child (GIRFEC) approach puts wellbeing at the very heart of its approach. The eight 'indicators' of wellbeing that form the basis of GIRFEC are safe, healthy, achieving, nurtured, active, respected, responsible and included, often referred to as 'SHANARRI.' Information relating to this can be found at: <http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright>

The Octagon Kidz Club provides a day care service for a maximum 32 children of school age. The service is provided from Claremont Parish Church in East Kilbride. The service operates Monday to Friday 15:00 - 17:45 term time and Monday to Friday 20:00 - 18:00 during in-service days and holiday periods.

The secure entry system was operated by staff. The children were located in the various rooms within Claremont Parish Church. There were toilet facilities for children, staff and visitors. There was also a kitchen used to provide snacks and drinks for the children. Parking was available at the front of the building for parents and staff.

The aims and objectives include:

- to offer play and education opportunities that are both challenging and fun
- promote the dignity, privacy, choice, safety, potential and diversity of all service users and staff
- provide a balanced range of activities, taking into account the age, development needs, interests, hours and patterns of attendance of each child or young person
- promote positive behaviour at all times.

## What people told us

We wrote this report following an unannounced inspection which was carried out by two inspectors from the Care Inspectorate on Monday 20 and Tuesday 21 February 2020 between 14:15 and 18:00. We gave brief feedback to the manager on the Tuesday and returned on Monday 17 February between 17:15 and 18:30 to complete this and award grades.

We spoke with several children at the inspection and three parents. We also received one completed questionnaire from a parent before the inspection.

We saw that children were happy in the club. They told us they liked to play football, with the lego and ping pong. The older children told us they liked having some time by themselves so they could play on their phones.

When it's near home time, children said they went and watched a movie. They told us they went to play outside, but only in the summer when it was nice and sunny.

Parents were satisfied with the service provided. They found staff approachable and 'great with the children.' Parents told us that children liked the activities offered such as lego and arts and crafts.

## Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection.

## From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of environment	3 - Adequate
Quality of staffing	2 - Weak
Quality of management and leadership	2 - Weak

## Quality of care and support

### Findings from the inspection

As children were cared for in caring environment they had developed good relationships with staff. If they needed it, children sought physical comfort from staff. They also had nice friendships with each other which meant they played well together. We saw that children were busy as they told us they could choose what activities they wanted to do. Children liked being creative and staff supported them by supplying the necessary resources, showing them what to do and offering praise and encouragement for their efforts. Older children could be independent and were able to spend time by themselves if they wanted to.

Basic information was recorded about children to keep them safe. Staff need to develop the use of personal plans for children. The ones we sampled did not contain information about children's individual needs and how these were being supported. For example, any strategies or techniques they use to support children should be clearly stated. The plans should be reviewed at least once in every six month period. (See recommendation 1).

On arrival at the club children had the opportunity to have a snack. We observed that this could be healthier as items included sausage rolls and ketchup and on the second day children made iced biscuits with jam and ate them as part of their snack. In line with guidance, the content of the snack menu could be reviewed to promote healthy eating. Children could also have more opportunities to develop their independence and self-help skills by being involved in preparing snacks.

### Requirements

Number of requirements: 0

## Recommendations

### Number of recommendations: 1

1. We recommend that information within Personal (care) plans must be sufficiently detailed so it is clear about the support in place for individual children.

\*The individual needs that children require support with.

\*This should include techniques and strategies that will be used to help children reach their potential.

\*Information about links with other agencies.

\*Parent/carer and where appropriate children's input should be evident.

\*Each plan should be reviewed at least once every six months with parents and where appropriate children. The plans should be signed and dated.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'my personal 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) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me'. (HSCS 2.17).

**Grade:** 3 - adequate

## Quality of environment

### Findings from the inspection

The service operated from Claremont Church halls where they had use of several rooms. Children had the opportunity to be active in the main hall and when they walked to the service from school. Consideration needs to be given to increasing opportunities for more outdoor play during term time so that children have access to fresh air and exercise. (See recommendation 1).

We accompanied staff when they collected children from school. We found that an established procedure was in place which staff were familiar with and ensured the safe collection of children from school. We observed that children were responsible and familiar with the procedure in place as they stopped at particular points to wait for everyone to catch up.

Although children had access to a range of activities, on occasion, their imaginative play was often interrupted and stopped. Children should have the opportunity to be involved in a range of play types and use their imagination and ideas within their play so they have positive experiences and appropriate challenge. To enable this staff should talk to children about risk in play, use best practice guidance and encourage children to make rules that enable them to make informed choices about what they are doing. Staff should also be mindful about restricting children's activities at the end of the day as tidying up took place. (See recommendation 1).

## Requirements

**Number of requirements:** 0

## Recommendations

### Number of recommendations: 1

1. We recommend that staff develop the range of activities children have access to, including the opportunity to play outdoors every day.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors. (HSCS 1.25)

**Grade:** 3 - adequate

## Quality of staffing

### Findings from the inspection

Staff were aware of their role and responsibilities in relation to the day to day running of the club. They followed procedures which kept children safe. There was a range of experience and skills within the staff team. They worked well together and circulated within all areas of the service so children were appropriately supervised. The interactions between staff and children were kind, caring and respectful. We also saw that staff welcomed parents into the service and had good relationships with them.

The recruitment procedure in place did not follow best practice guidance. After sampling files we concluded that not all information needed to support safe recruitment practice was collected before making a decision to appoint staff. For example, there was no information about the interview process and not all the necessary fit person checks were completed before staff started working at the service. The manager should review and update the policy and procedure in place to reflect current best practice. She should ensure all elements of safer recruitment are followed to promote children's safety and ensure suitable candidates are appointed to the workforce. (See requirement 1).

Staff induction needs to be further developed so there is a record of how staff are supported when they start working at the service. It should contain more information about staff practice and competencies. This would help assess their performance against documents such codes of practice and the health and social care standards. Where areas for development are identified, there should be clear goals and timescales so progress can be monitored. (See recommendation 1).

The provider did not have formal systems in place to support the manager or staff. We identified areas of practice which caused concern, particularly in relation to the operational aspects of the service and safeguarding. (See requirement 2).

To support the continued professional development of staff, an analysis should be undertaken to identify what training or research they need to help them develop their skills, knowledge and experience in line with current practice. This should include infection control and health and safety. In addition, opportunities to visit other services may be useful for staff to see how they operate and implement current guidance. Staff should be encouraged to evaluate their training and demonstrate how it has helped their practice. (See recommendation 2).

## Requirements

### Number of requirements: 2

1. The provider and manager must ensure all staff employed are fit to be employed. As detailed in the safer recruitment guidance, you may wish to consider alternative arrangements to staffing until all fitness checks have been satisfactorily received, the use of agency staff and completion of a risk assessment as detailed on page 39 of the guidance. The recruitment policy should be reviewed in line with this guidance and all future recruitment should be in line with this.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 2011/210 regulation 9 Fitness of employees and 15 Staffing.

Timescale for compliance: Friday 17 April 2020.

2. The provider must implement a system to provide support to the manager and staff, which demonstrates the manager and staff have the necessary skills and knowledge to undertake their role. Training needs of the manager and staff should be considered as part of this process with identified training needs such as Child Protection addressed.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 2011/210 regulation 7 Fitness of managers and 15 Staffing.

Timescale for compliance: Friday 17 April 2020.

## Recommendations

### Number of recommendations: 2

1. We recommend that the manager further develop the induction procedure so it is an effective tool to assess staff practice and competencies. This will help identify areas for professional development.

This is to ensure I have confidence in the people who support me, consistent with the Health and Social Care Standards which state '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).

2. We recommend that a training plan be developed which supports the continued professional development of staff. Staff should evaluate any training or research they undertake to show how it has helped their practice and improved outcomes for children.

This is to ensure I have confidence in the people who support me, consistent with the Health and Social Care Standards which state '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)

**Grade:** 2 - weak

## Quality of management and leadership

## Findings from the inspection

There was no management committee (the provider) in place until recently. The constitution requires that a member of the Church is also a committee member. This is not the case. Although the manager advised the constitution had been amended, no evidence was provided to confirm this. The committee has not yet demonstrated an understanding of their role as a registered provider in leading a service. For example addressing the requirements made at previous regulatory visits and supervising the manager in their role. See requirements 1 and 2.

The policies and procedures to help guide practice in the service had not been reviewed or updated for some time. The manager and provider should ensure that the policies in place reflect current best practice. They should ensure that staff are familiar with the content so they are aware of what is expected of them as practitioners. See recommendation 1.

The provider and manager need to introduce systems that can be effectively used to monitor the work of the service. These could include 1:1 meetings, observation of practice and self evaluation. The information gathered should be used to compile and improvement plan for the service. This will help support the development of the service and improve outcomes for children. See recommendation 2.

## Requirements

### Number of requirements: 2

1. The provider must evidence that the committee status is in line with the constitution, ensuring all committee members are notified to the Care Inspectorate in order for fitness checks to be progressed.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 2011/210 regulations 6 Fitness of providers and 4 (a) welfare of users.

Timescale for compliance: Friday 17 April 2020.

2. A detailed action plan should be submitted which demonstrates; how the committee will increase their awareness of their role and responsibilities and how the committee will progress the improvements identified.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 2011/210 regulations 6 Fitness of providers and 4 (1) (a) welfare of users.

Timescale for compliance: Friday 17 April 2020.

## Recommendations

### Number of recommendations: 2

1. We recommend that the policies and procedures for the service be reviewed and updated so they reflect current best practice and can be effectively used to guide staff in their work. As a priority, but not exclusively, these should include child protection, safe recruitment, health and safety, lone working and infection control.

This is to ensure I have confidence in the organisation providing my care and support, consistent with the Health and Social Care Standards which state 'I experience high quality care based on relevant evidence, guidance and best practice'. (HSCS 4.11).

2. The provider and manager should identify systems that can be used to effectively monitor the work of the service. The priority areas for development should be outlined within an improvement plan so progress can be monitored,

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

**Grade:** 2 - weak

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

### Previous requirements

#### Requirement 1

In order to ensure that children are cared for safely the provider must submit evidence that - all staff and volunteers working in the care service have been appropriately and safely recruited. This must include an up to date PVG and or a scheme update check for all staff.

To be completed by: 10 January 2020.

This is to ensure care and support is consistent with Health and Social Care Standard 4.24: I am confident that people who support and care for me have been appropriately and safely recruited.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 20 November 2019.**

#### Action taken on previous requirement

Not all fit person checks were in place for staff. At feedback on 17 February 2020, the manager provided us with an PVG scheme update for one staff member. However other checks such as two references were not in place.

**Not met**



## 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

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

### Enforcement

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

### Inspection and grading history

Date	Type	Gradings
31 May 2017	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div>
26 Feb 2016	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div>
11 Mar 2015	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div> <div>5 - Very good</div>

Date	Type	Gradings	
29 Jan 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
18 Jun 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
31 May 2011	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
20 May 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	2 - Weak
		Management and leadership	2 - Weak
16 Jun 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	2 - Weak
		Management and leadership	2 - Weak

## 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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 ਵਿੱਚ 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.