

# Preschool Academy Day Care of Children

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Coatbridge  
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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
29 October 2020

**Service provided by:**  
Preschool Academy (Scotland) Ltd

**Service provider number:**  
SP2015012437

**Service no:**  
CS2014332769

## About the service

We carried out an announced inspection of Preschool Academy between 26 October 2020 and 28 October 2020 using 'Near Me' technology. Feedback was given on 29 October 2020.

The service registered with the Care Inspectorate on 27 March 2015 to provide a care service to a maximum of 59 children at any one time aged from birth to those not yet attending primary school.

The nursery is a private organisation who work in partnership with North Lanarkshire Council to provide early learning and childcare to eligible children.

Care is provided from a single storey property within a residential area of Coatbridge, North Lanarkshire. The nursery is close to parks, shops, transport links and other local amenities.

Children are accommodated within three playrooms, separated by their age and stage. Secure garden spaces are also accessible for all age groups to use.

Aims of the setting include, striving to ensure that all children feel secure and settled within the nursery setting, giving praise and encouragement to all children, and promoting good self esteem.

This was a focussed inspection to evaluate how well children were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of children experiencing care during the pandemic.

This inspection was carried out by inspectors from the Care Inspectorate.

We check services are meeting the principles of Getting it Right for Every Child (also known as GIRFEC), Scotland's national approach to improving outcomes and wellbeing for children by offering the right help at the right time from the right people. It supports them and their parent(s) to work with the services that can help them. There are eight wellbeing indicators at the heart of Getting it Right for Every Child: safe, healthy, achieving, nurtured, active, respected, responsible, included.

## What people told us

We gathered the views of parents and children to evaluate the quality of the service.

We spoke with three children using Near Me technology. Children excitedly told us about their experiences at nursery. They were relaxed and happy throughout the conversation. Observations of children reflected this. We observed them to be settled and busy playing.

We spoke to nine parents on the telephone and through email. They all spoke warmly about the quality of care their children received. In particular they commented positively on the safe environment, sharing of information and support from the staff. One parent said the nursery was like an 'extended family'.

## 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 and support during the COVID-19 pandemic?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our care and support during the COVID-19 pandemic?

### 3 - Adequate

#### 5.1 Children's health and well being are supported and safeguarded during COVID-19

Children attending the service were happy and settled. They had positive relationships with staff who cared for them with warmth and kindness. We observed children receiving lots of cuddles, contributing to them feeling loved and supported.

New children, and those returning to nursery following lockdown were offered settling visits to support their wellbeing. Parents told us that these were useful to relieve any anxieties.

Staff knew children well. They confidently described children's likes, dislikes, and interests. Their knowledge about children's needs was enhanced through regular communication with parents and carers. 'All about me' records highlighted changes to children's lives. Staff used information within them to plan how to meet children's needs.

Parents commented positively on the way staff communicated with them, working together to meet children's needs. Good use of messenger, social media, diaries and email ensured sharing of information impacted on meeting children's needs. For example, two parents told us that the use of messages supported their children to continue potty training on their return to nursery.

The service kept in touch with families during lockdown. Social media posts and face time calls helped keep children connected to their peers and staff.

Children were protected from harm by staff who had a good understanding of their roles and responsibilities in relation to child protection. Staff had participated in child protection training.

Children's wellbeing was supported through a new emotions programme. As a result of this, children were developing an understanding about how they were feeling. Continued development of this programme could support children to cope with more difficult to manage emotions that may be a direct result of COVID.

The service could make better use of relevant agencies to support meeting children's needs. For example, virtual conversations with speech and language therapists could help staff to plan strategies that would support children to progress their development.

#### 5.2 Infection prevention and control practices support a safe environment for children and staff

Children were protected as staff took necessary precautions to prevent the spread of infection.

Clear policies and procedures were in place to ensure a consistent approach to infection control. These included a COVID risk assessment, illness policy and COVID health and safety policy.

Staff have received training on infection prevention and control which adheres to COVID-19 guidance. They demonstrated their knowledge of this in practice to keep children safe. For example, by hand washing, cleaning and physical distancing with other adults.

Physical distancing was implemented for adults in the setting and included parents and carers. Children

were dropped off at the nursery door without parents entering the building. On the rare occasion where children's emotional needs supported parents entering the service this was managed well as parents wore masks, gelled their hands and observed physical distancing. Signage around the premises reminded adults to social distance.

Children's time outdoors was maximised to reduce the risk of transmission. A new outdoor shelter had been developed, and the service had provided every child with a puddle suit to keep them comfortable in all weathers.

We observed that windows and doors were open where appropriate to increase natural ventilation.

Staff had access to personal protective equipment (PPE). They used this at appropriate times. However, to enhance infection prevention and control, staff would benefit from training in putting on and removing PPE safely.

Children were supported to understand the need for good hygiene. Posters, role modelling from staff, and craft activities about germs had developed a fun approach to hand washing.

We evaluated that the use of soft furnishing could be minimised. These items are not easy to clean and could present a risk for the spread of infection.

### **5.3 Staffing arrangements are responsive to the changing needs of children during COVID-19**

Staffing levels at the service were sufficient to meet children's needs, in addition to the extra demands placed on staff due to COVID. An external cleaner and support from management lessened some infection control pressures, allowing staff time to focus on children. The service recognised that additional staff would be of benefit and were recruiting at the time of the inspection.

Staff observed social distancing guidance. Staff breaks happened individually due to space available in the staff room. This minimised the risk of transmission.

Training helped staff develop an understanding of their roles and responsibilities. The organisation evaluated the impact of training by observing staff practice and meeting with them feedback on performance. This impacted on improvement actions which supported safe practice.

The management team should continue extending the use of staff observations to evaluate how effectively children's needs are being met. For example, observations of children's play and learning experiences would support staff to progress children's development.

We asked the service to revisit their COVID illness policy with staff. We found that the policy had not been followed on one occasion resulting in the management team being unaware when a child had developed COVID symptoms whilst at nursery.

Staff were well supported by the organisation. They were a new team who had bonded quickly. They spoke positively about their work and said that they felt supported by and connected to their team. This helped to create a positive and happy environment for children.

A clear staffing contingency plan was not in place. This is recommended to support operations during the pandemic. We advised the service to develop a clear plan detailing what they would do if staff were absent from work due to COVID. This would help to ensure that staffing levels were appropriate to meet children's

needs.

At the last inspection we identified that quality assurance systems should be improved. We have repeated this area for improvement at this inspection. The service had made a positive start on developing auditing tools. These were beginning to make an impact, but should continue to be developed to ensure risks are robustly assessed. For example, the risks associated with an external teacher attending the setting had not been fully considered.

## Areas for improvement

1. The service should have robust and transparent quality assurance processes in place, to ensure the consistency of quality for those using the service.

To achieve this the service should consider how they are doing, how they know and what they will do next. Consideration in particular should be given to monitoring of;

- Quality of children's experiences
- Quality of staff practice
- Quality of environment
- Use of good practice guidance
- Impact of staff training
- Registration with the Scottish Social Services Council

This is to ensure that care and support is consistent with the Health and Social Care Standards which state as a child "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

## 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

The service should further develop children's personal plans to ensure that their needs are well planned, reviewed and met.

To achieve this personal plans should include;

- Development targets which are of significance to that child as an individual
- Details of 'how' the child's needs will be met
- Reviews that indicate if the child's needs have been met

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "my personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15)

**This area for improvement was made on 19 July 2019.**

#### Action taken since then

Staff regularly communicated with parents to develop personal plans which supported meeting children's needs. Staff demonstrated that they knew children well and planned to meet their needs.

Therefore, this area for improvement has been met.

#### Previous area for improvement 2

The manager should assess and support the development of individual staff. This is to ensure continuous improvement in the service.

To achieve this the manager should;

- Complete staff performance reviews regularly, setting clear and constructive individual areas for development.
- Observe the progress of staff practice.
- Engage in reflective professional discussions with staff about their learning linked to good practice guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I use a service that is well led and managed" (HSCS 4.23) and "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 19 July 2020.**

## Action taken since then

Staff had participated in training that developed their understanding of their roles and responsibilities.

A performance review programme coupled with observations of practice was supporting staff development.

Therefore, this area for improvement is met.

## Previous area for improvement 3

The service should review and improve children's meal times. Consideration should be given to;

- Creating a calm and relaxing meal experience
- Providing support appropriate to the needs of children
- Effective supervision at meal times
- Supporting the youngest children to be more independent

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected" (HSCS 1.34) and "I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible" (HSCS 1.35).

**This area for improvement was made on 19 July 2019.**

## Action taken since then

Children mostly experienced a calm and relaxed meal experience. Staff sat with children to support their needs. The 'Little Scholars' room had positively progressed their meal time experience since that last inspection but should continue developing approaches.

This area for improvement is met.

## Previous area for improvement 4

The service should have robust and transparent quality assurance processes in place, to ensure the consistency of quality for those using the service.

To achieve this the service should consider how they are doing, how they know and what they will do next. Consideration in particular should be given to monitoring of;

- Quality of children's experiences
- Quality of staff practice
- Quality of environment
- Use of good practice guidance
- Impact of staff training
- Registration with the Scottish Social Services Council

This is to ensure that care and support is consistent with the Health and Social Care Standards which state as a child "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

**This area for improvement was made on 19 July 2019.**



## Action taken since then

The service had made a positive start on developing quality assurance systems. These had progressed considerably since the last inspection.

More work is however still necessary to ensure that these processes are used consistently to ensure on-going improvement.

Therefore, this area for improvement is not met and will be reviewed at the next inspection.

## Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
5.1 Children's health and well being are supported and safeguarded during COVID-19	4 - Good
5.2 Infection prevention and control practices support a safe environment for children and staff	4 - Good
5.3 Staffing arrangements are responsive to the changing needs of children during COVID-19	3 - Adequate

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