

Little Scholars (Nursery) Limited

Day Care of Children

Scholars Gate
Whitehills
East Kilbride
Glasgow
G75 9DN

Telephone: 01355 900119

Type of inspection:
Announced (short notice)

Completed on:
27 November 2020

Service provided by:
Little Scholars (Nursery) Limited

Service provider number:
SP2004937433

Service no:
CS2003041099

About the service

Little Scholars (Nursery) Limited registered with the Care Inspectorate on 1 April 2011.

The service is provided from a single-storey building in the Whitehills area of East Kilbride, South Lanarkshire. There are five playrooms, a sensory room, a central area and large enclosed outdoor play areas which are accessible from all playrooms. Children also benefit from regular visits to a nearby woodland area. The service is close to the town centre, main roads and public transport links.

The service is provided by Little Scholars (Nursery) Limited and is registered to provide a care service to a maximum of 100 children:

- 28 children birth to under 2 years
- 21 children 2 to under 3 years
- 51 children 3 years to those not yet attending primary school.

The service is in partnership with South Lanarkshire Council to provide funded places for children aged three and over. At the time of the inspection, there were 113 children registered with the service.

The aims and mission statement of the service state: 'Little Scholars, the place where everyone is included, respected and valued. We are dedicated in delivering the highest quality care and service to our children and families by providing a safe and stimulating environment where play and learning go hand in hand.'

We undertook this inspection using virtual methodology which includes the use of technology to inspect services. As part of this process, we undertook the following:

- discussions with the provider and management team;
- discussions with seven nursery staff;
- telephone discussions/email responses from six parents of children who attend the service;
- observations of the areas children and staff access over the course of the day;
- observations of children and staff as they interacted and participated in a variety of activities, both indoors and outdoors;
- sampled children's personal plans; and
- sampled methods of consultation and communications with parents and staff.

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

This inspection took place between 23 and 26 November 2020. Feedback was given to the service on 27 November 2020. Further discussions took place with the provider and the manager on 4 December 2020 and 10 December 2020 in relation to immediate actions taken.

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

What people told us

We observed children to be happy and settled within the service. We saw children participating in various activities, both indoors and outdoors, over the course of our observations. We did not engage in conversations with children during this inspection.

We shared our contact details on the nursery's app to invite parents to share their experiences with us. Two parents contacted us by telephone or email to share their views over the week of the inspection and four parents contacted us afterwards. All six parents spoke highly of the communication in the service, in particular the nursery app, which offered a two-way link between the service and the parents. They spoke highly of the qualities of the management and nursery staff team and felt they were managing well over this challenging time.

One parent felt there had been a high turnover of staff recently. Two parents felt it would be beneficial to find out more about what was happening within the playrooms with more information what their children were learning about, particularly as they could no longer come into the playrooms. We shared all parental comments anonymously with the service.

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?	2 - Weak
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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?

2 - Weak

Quality indicator 5.1: Children's health and wellbeing are supported and safeguarded during COVID-19.

Management and staff had taken account of current national guidance in relation to COVID-19 in early learning and childcare settings. We discussed some aspects of more recent guidance which the service then actioned. This was regarding the recommendation that hand sanitisers should not be used by children under the age of five. The provider agreed to share this information with parents and remove the hand sanitiser at children's level at the outdoor entrance, as children always washed their hands on arrival. This would contribute to children's health and wellbeing.

We observed caring, nurturing interactions between staff and children in all playrooms. The service had considered children's patterns of attendance, friendship groups and staff rotas to ensure continuity and consistency of care for children each day. This contributed towards children feeling safe and secure and supported children's individual care and development needs.

'All About Me' booklets and personal plans had been reviewed and updated with parents prior to children starting or returning to the service. This ensured parents' views were included and respected and assisted staff in planning the support for individual children's changing health and wellbeing needs during COVID-19. A recommendation made at the previous inspection in regards to personal plan development had been met.

Children had access to the extensive, enclosed outdoor play areas each day. In discussions, it was clear that the management and staff recognised the benefits of fresh air and that play in an outdoor environment reduced the risks of COVID-19 infection. We advised that staff should maximise the use of these outdoor areas for all age groups.

Recognising the challenges of physical distancing between adults, the service had developed a range of processes to continue communication between families and the service. The use of an app provided a valuable and effective two-way communication with families.

Quality Indicator 5.2: Infection prevention and support practices support a safe environment for children and staff.

We observed clear signage for a one-way system, prompts to support adults in physically distancing, resources to support hand hygiene and information displayed indoors and outdoors. This supported infection prevention and control practices as families arrived to drop off or collect their children.

Systems were in place for enhanced cleaning of playrooms, toys and equipment. Staff had defined roles and responsibilities each day to ensure cleaning took place without impacting on children's play and learning. We observed high touchpoint areas and resources being cleaned within all playrooms and saw that windows were open throughout the premises as required for ventilation. Although this contributed to the provision of a safe environment for children and staff, we also raised significant concerns in relation to infection prevention and control. These concerns had the potential to spread infection within the service and impact negatively on outcomes for children.

A letter was then sent to the provider which detailed the areas that were required to be addressed immediately. This included:

- ensuring effective hand washing was undertaken by all staff;
- ensuring that both nappy changing areas for children aged under two and the associated resources were brought into line with current guidance; and
- ensuring nappy changing procedures were reviewed and updated in line with current guidance. The correct procedures should be shared and discussed with all staff and staff practice monitored by the management team.

We sent the service relevant guidance such as 'Space to Grow', 'Nappy changing facilities for early learning and childcare services: information to support improvement' and signposted them to online training clips for the correct use of PPE and robust hand washing procedures to assist them with this improvement. We had further discussions with the provider and manager after the inspection and we were satisfied that all of these areas had either been addressed or were in the process of being actioned. We acknowledged it took time to order and install full doors at the entrance to both nappy changing areas for the children aged under two, but that suitable doors had now been sourced. We have asked that the provider notify us when these doors are in place. These improvements would contribute to children's health and wellbeing and maintaining a safe and healthy environment for children and staff.

A requirement had been made in regards to infection prevention and control at the last inspection. Although we acknowledged that most aspects had been actioned, some areas were still outstanding. Therefore, this requirement has been repeated at this inspection, with the outstanding elements and additional areas noted.
(See requirement 1)

Quality Indicator 5.3: Staffing arrangements are responsive to the changing needs of children during COVID-19.

We observed staff working well as a team within all playrooms. We saw that practitioners and trainees had been deployed effectively within the service. A supernumerary member of staff was in place to assist with additional cleaning duties and assist over children's lunch times. This ensured the remaining staff could concentrate on children's play and learning or sit alongside them during lunch.

We advised staff to review the systems in place when preparing for the children's lunch. This would ensure children were not sitting at tables waiting for their lunch to arrive in the playroom.
(See area for improvement 1)

Staff demonstrated some understanding of when they should use PPE (personal protective equipment) and follow other infection prevention and control practices. This included staff being vigilant in washing their own hands and children's hands at the appropriate times, but not for the required length of time or fully supervising children as they undertook this. We acknowledged that staff wore masks at the required times, but these were not all worn or stored correctly when not in use. Management and staff practice improved once we brought this to the manager's attention.

We acknowledged the strong relationships children had forged with the cook and housekeeper in the service. We shared our observations where their contact with all children in all playrooms may have the potential to spread infection within the service. We advised that the arrangements and routines for these additional members of staff to carry out their duties, should be reviewed to minimise potential risks. This

was addressed over the course of the inspection and the revised procedures were shared with us. This responsive change in staffing arrangements contributed to children's overall health, wellbeing and safety.

Staff told us that they felt supported both professionally and personally by management during the lockdown period and once they had returned to work. They told us of online training they had undertaken and the outcomes of this. They felt informed about COVID-19 and reassured by the revised procedures within the service, which contributed to keeping children, families and staff safe.

Some monitoring systems had been introduced as recommended at the last inspection. The deputy told us that the focus had been on planning and children's learning journals and that although some informal monitoring had taken place regarding the new procedures for COVID-19, no formal monitoring had been undertaken. As we had recommended there should be more robust quality assurance systems to improve the outcomes for children, we have repeated this recommendation at this inspection.
(See area for improvement 2)

Requirements

1.
By 8 January 2021 and in order to ensure the premises are fit to be used for the provision of a care service, the provider must ensure that robust infection control procedures are in place which staff must follow at all times. These must include the following:

- children supervised to wash hands prior to eating food and after playing outdoors;
- staff to practise effective handwashing;
- toilet door/nappy changing doors should be full length and closed at all times;
- ensure that both nappy changing areas for children aged under two and the associated resources are brought into line with current guidance; and
- ensure all staff follow the correct nappy changing procedures and that this is monitored by the management team.

This is to ensure 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 5.22); and in order to comply with Regulation 10(2)(b) and (d) - Fitness of premises of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011.

Areas for improvement

1. We acknowledged that the lunchtime menus, portions and the transporting of food to the playrooms had been improved as recommended at the last inspection. However, we advised the service to review the procedures for the preparation for lunch. This would ensure children were not sitting for too long while waiting for their lunch to be served.

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

'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible.' (HSCS 1.35)

2. The management should continue to develop robust quality assurance systems which can be used to improve the outcomes for children attending the service.

This would ensure that care and support is in line 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)

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

Requirements

Requirement 1

By 30 March 2020 and in order to ensure that the premises are fit to be used for provision of a care service, the provider must ensure that robust infection control procedures are in place which staff must follow at all times. These include:

- children supervised to wash hands prior to eating food and after playing outdoors;
- staff to practise effective handwashing;
- a clean apron must be worn for each child during nappy changing and removed before leaving the changing room;
- changing area within the 2-3 room should be thoroughly cleaned with nappies, potties and wipes stored appropriately in line with good practice;
- changing unit should be cleaned and the correct size of mat used;
- nappy bucket must have the lid on at all times to help keep the room free of odours;
- toilet door should be full length and closed at all times;
- sleep mats need replaced; and
- mops and buckets should be stored out of the reach of children.

This is to ensure 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 5.22); and in order to comply with Regulation 10(2)(b) and (d) - Fitness of premises of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011.

This requirement was made on 18 February 2020.

Action taken on previous requirement

The majority of this requirement had been actioned in regards to the 2-3 nappy changing/toilet area and playroom. We discussed the outstanding elements of this requirement. As this requirement has not been fully met, it has been repeated within this report.

Not met

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

Information in children's personal plans should be fully completed and dated. Changes in a child's care needs, development stage, family circumstances and interests should be regularly reviewed to ensure staff have an up-to-date picture of the child's needs enabling them to offer the correct care and support for learning and development.

This is to ensure that care and support is in line 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)

This area for improvement was made on 18 February 2020.

Action taken since then

We sampled children's personal plans. We saw that they had been reviewed prior to children returning to nursery after the lockdown period. We advised ensuring all relevant dates were recorded for all children, but agreed that this recommendation has been met.

Previous area for improvement 2

The service should review current arrangements for the lunchtime routine, focusing on the following:

- using best practice to ensure meals are healthy, well-balanced and portion controlled;
- review the length of time younger children are sitting waiting for lunch;
- promote children's independence, for example, serving themselves and pouring their own drink;
- plated food should be stored appropriately while it cools;
- food should be covered while being transported from kitchens to playrooms to prevent cross-contamination; and
- water should be available to all children throughout the day.

This is to ensure that care and support is in line with the Health and Social Care Standards which state that:

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables and participate in menu planning.' (HSCS 1.33); and 'I can drink fresh water at all times.' (HSCS 1.39)

This area for improvement was made on 18 February 2020.

Action taken since then

We discussed our observations of the lunchtime experience. We saw that meals were covered while being transported to the playroom and portions in line with guidance. We acknowledge that children cannot serve themselves during COVID-19 to assist with the enhanced infection prevention and control measures in place, but that this will be implemented, when advised. We discussed the length of time children had to sit

waiting for lunch and were reassured that the lunchtime routine would be reviewed and actioned immediately to ensure children did not have to wait for an unacceptable length of time. Therefore, we have agreed that this recommendation has been addressed.

Previous area for improvement 3

To further extend children under three's learning and development, staff should review and extend resources to promote children's curiosity and creativity. They should also update their knowledge and skills regarding how young children learn.

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 for my age and stage which stimulate my natural curiosity and creativity.' (HSCS 2.27)

This area for improvement was made on 18 February 2020.

Action taken since then

We acknowledged that resources had been reviewed and risk assessed to ensure they were able to be cleaned thoroughly over this period. We saw that children had some choices to promote their curiosity and creativity and accepted that this will continue to be reviewed and monitored by staff in the playroom and by management. Therefore, this recommendation has been addressed.

Previous area for improvement 4

Staff working with the under three's should access training and best practice documents 'Building the Ambition' and 'Realising the Ambition' to enable them to support children's learning and development.

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 18 February 2020.

Action taken since then

Staff had accessed these documents and completed some online training for working with children under the age of three. We acknowledged that due to COVID-19, further plans and meetings had been put on hold. As there are plans in place to re-visit this, we agreed that this recommendation has been addressed.

Previous area for improvement 5

The management should continue to develop robust quality assurance systems which can be used to improve the outcomes for children attending the service.

This is to ensure that care and support is in line 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 18 February 2020.

Action taken since then

We accepted that an improvement plan had been devised, some monitoring had been undertaken within the service, but that more robust quality assurance systems should continue to be developed. This would include formal monitoring of the new practices and procedures introduced over COVID-19 and the areas for improvement highlighted within this report. This would contribute towards improved outcomes for children attending the service. Therefore, this recommendation has been repeated at this inspection.

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	2 - Weak
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	2 - Weak
5.3 Staffing arrangements are responsive to the changing needs of children during COVID-19	3 - Adequate

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