

Happy Hours Out Of School Club Day Care of Children

St.Fergus Primary School Turnberry Avenue Dundee DD2 3TP

Telephone: 01382 828894

Type of inspection:

Unannounced

Completed on:

4 December 2020

Service provided by:

Happy Hours Out Of School Club

Service provider number:

SP2003000121

Service no:

CS2003000710



About the service

Happy Hours Out of School Club is registered to provide a care service to a maximum of 50 children at any one time. A breakfast club is also provided to a maximum of 24 children in St. Mary's Community Church Hall, Dundee. The age range of the children will be from those attending primary school to the age of 12.

The club is provided by a voluntary committee of parents who are responsible for its operation. The service registered with the Care Inspectorate in April 2011.

Aims of the service include providing the highest quality childcare service within St. Fergus Primary School that meets the needs of parents/carers who work or study out with the normal school day. The service also aims to offer an inclusive service that is accessible to all children in the community, to ensure each child feels happy, safe and secure, allowing them to learn and develop freely in a play centred environment.

This was a focused inspection to evaluate how well people 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 people experiencing care during the pandemic.

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

We undertook this inspection by carrying out an onsite visit on 1 December 2020 to assess the premises and observe practice. We concluded the inspection on 4 December 2020, with virtual methodology which included the use of technology. As part of this process we undertook the following;

- telephone and video discussion and feedback with the manager and deputy
- video discussion with staff
- reviewed documentation emailed by the service.

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, and included. These are often referred to as the SHANARRI wellbeing indicators.

What people told us

We spoke with the children attending the service as they played indoors and outside. They talked about returning to the service after lockdown and the new routines that had been introduced, snacks and play experiences.

They told us:

"I like it here. They are nice to us and I like playing outside."

"We play inside and in the playground. We have torches now it's dark."

"Snacks could be better as lots of bread products."

"Sometimes it's good but can be boring."

"It's ok. We have drawing competitions."

"I like it here. We go outside and take the torches."

"Club's good for seeing our pals."

We spoke with one parent during the visit and left our contact details to share with the parents. No other parents had made contact on writing this report. The parent we spoke with said she had been well supported by the service along with her child. She said the manager had been brilliant.

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

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 wellbeing are supported and safeguarded during COVID-19

From the evidence gathered during the inspection, we evaluated the service as adequate in this area.

We observed that children were happy attending the service and had a good rapport with staff which enabled a relaxed, social environment. With support from staff, discussions around changed routines and gentle reminders children had settled back into the service after their lengthy time away. They had adjusted well to new routines and understood the reasons for the implementation of Scottish Government guidance. Children new to the service were given time to settle into the club, dependent on their individual needs, playing outdoors and then settling inside.

Staff were very aware of children's health and wellbeing on their return to the service. They had discussed with the children their worries, anxieties and emotions around COVID-19 and had also completed a questionnaire on returning to the club. Gathering this information and getting to know the children in the smaller school bubbles helped staff support children as individuals. Every child had an up to date personal plan in place which contained relevant information for the children. The management team were aware that this information was to be reviewed at least every six months. We reminded them to ensure that all documentation was to be signed and dated by parents and the service, in order that the most relevant information was gathered and shared with the staff team. A system was being developed to ensure the plans were routinely monitored and updated as needed.

Children who required medication had paperwork in place to support the service in administering this, however not all the necessary detail had been completed. We discussed the importance of this with staff, who agreed to have the forms updated. We have continued the requirement from the last inspection. Please see requirement 1.

Staff had undertaken child protection training and were now fully aware of their responsibilities in keeping children safe and protected. A policy and relevant paperwork were in place to support staff.

We observed children playing indoors and outdoors, whilst in their school bubbles. At times we saw missed opportunities to better support and stimulate children's play due to the limited resources. After a discussion with the manager we were confident that the service would consider these observations and look to further develop children's experiences whilst at the club.

Whilst staff had begun to listen to children's voices and record opinions, ideas and suggestions on various areas of the service, they should ensure that feedback provided to them is discussed with the children and acted upon timeously. Parental feedback on many areas of the service and the reopening had also been obtained, which was very positive. The service discussed involving parents in the development of further communication methods, such as, social media. The recommendation from the previous inspection has been continued. Please see area for improvement 1.

The service had maintained contact and developed relationships with families throughout lockdown with videos from staff and emails. Since the service had reopened and face to face contact with parents was still limited, the service had continued to communicate in a variety of ways. For example, via emails, newsletters and the occasional distanced face to face with parents outdoors or at the doorway. The staff team continue

to communicate effectively with parents and are considering the development of different communication methods to reach all families.

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

From the evidence gathered during the inspection, we evaluated the service as adequate in this area.

The staff team had Scottish Government guidance available to them and ensured a shared knowledge to keep the children, families and themselves safe. Information had been shared with parents on the reopening of the service, informing families of guidance and the changes to routines within the service. The service made clear to parent's expectations should a child be unwell, to keep all children and staff safe.

The layout of play spaces provided opportunities for small groups and bubbles to be managed in line with Scottish Government guidance and support the management of COVID. All staff had undertaken COVID-19, infection control and hand hygiene training and we observed them display training and guidance within their practice.

We found toilets and handwashing facilities to be clean and well stocked on soap and handtowels to support infection control. Hand hygiene had been considered for staff. This included hand sanitisers for staff at entrance/exit areas, and staff being provided with their own pocket sanitiser. We encouraged the club to continue to monitor hand hygiene with the children as it was evident children were using hand sanitiser in replacement of available soap and water.

Enhanced cleaning regimes were in place for surfaces, resources, and frequent touch point areas. We observed all areas to be visually clean, however, reminded the service of the need for better general organisation to further support the management of cleaning and opportunities for cross contamination.

Children played outdoors as much as possible to minimise the risk of virus transmission in line with Scottish Government guidance. Management said they had been discussing outdoor play, considering the winter months, changes in weather conditions and lighting. We agreed this would benefit the service and advised they review the outdoor risk assessment.

We asked the service to consider how they can put in place adequate checks and audits of the environment, to ensure play equipment and resources are cleaned and stored appropriately.

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

From the evidence gathered during the inspection, we evaluated the service as adequate in this area.

Staff told us they felt supported by management as it had been an anxious time returning to work after lockdown. They all now felt settled and were enjoying working with the children again. Staff we spoke with said they took responsibility for accessing guidance and updates about Covid-19, not just relying on information shared by the manager. We observed staff to be motivated and interested in their work.

As there was a smaller number of children attending the service currently and nearly the full complement of staff, this allowed for flexibility in staffing arrangements to support children as individuals and allow for cleaning tasks to be undertaken without being detrimental to children's outcomes.

Staff had undertaken COVID-19 training, hand hygiene and infection control training on their return to work. They have also carried out online child protection training to develop their knowledge in protecting and

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safeguarding children. Management told us that staff meetings were held regularly, with discussions held regarding national guidance and updates, planning, individual children and staff wellbeing. Monitoring of the impact of training was considered by management during discussions at staff supervision sessions and informal observations of staff practice on a day to day basis. We discussed with management the benefits for the team of reflecting on and recording how training and learning has influenced practice. Management and staff should continue to identify professional development opportunities continuing to develop staff knowledge, skills and practice that will support positive outcomes for children. We have continued the recommendation from the last inspection. Please see area for improvement 2.

Quality assurance systems were still at a very early stage and we discussed the continued evaluation and monitoring processes of the service that should be carried out to support the development of identified priorities in the service. We have continued the requirement from the previous inspection. Please see requirement 2.

Requirements

1. When requiring medication, children should receive treatment in a safe and effective way. The provider must improve their procedures of care and support to ensure everyone is aware of children's needs, and how to respond in the event of an emergency. This should be in place by the 30 December 2020.

This is to ensure the quality of the care and support is consistent with the Health and Social Care Standards, which state that my care and support is provided in a planned and safe way, including if there is an emergency or unexpected event (HSCS 4.14).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for a Care Service) Regulations, Scotlish Statutory Instruments 2011, 210 Regulation 4 Welfare of Users - (1) a provider must (a) make proper provisions for the health, welfare and safety of service users.

2. Children should experience a high quality of care and support that protects, respects and empowers them. The manager should improve systems for auditing and reviewing paperwork to ensure the service is well managed. This requirement should be met by 30 December 2020.

This is in line with the Health and Social Care Standards that state, I use a service and organisation that are well led and managed. (HSCS 4.23).

This is in order to comply with The Public Services Reform (Scotland) Act 2010, section 53 Inspections (6) SCSWIS may at any time require a person providing any social service to supply it with any information relating to the service which it considers necessary.

Areas for improvement

1. Children's feedback should be used to shape improvement within the service. Staff should reflect on their improvement plan to measure the impact of any changes made.

This is in line with the Health and Social Care Standards that state, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes. (HSCS 4.19).

2. Children should experience care from competent, skilled staff. The provider should improve the way staff's professional development is identified and reviewed to ensure it has a positive impact on children using the service.

This is in line with the Health and Social Care Standards that state, 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 requirements we made at or since the last inspection

Requirements

Requirement 1

When requiring medication, children should receive treatment in a safe and effective way. The provider must improve their procedures of care and support to ensure everyone is aware of children's needs, and how to respond in the event of an emergency. This should be in place by the 14 June 2019.

This is to ensure the quality of the care and support is consistent with the Health and Social Care Standards, which state that my care and support is provided in a planned and safe way, including if there is an emergency or unexpected event (HSCS 4.14).

This is order to comply with The Social Care and Social Work Improvement Scotland (Requirements for a Care Service) Regulations, Scottish Statutory Instruments 2011, 210 Regulation 4 Welfare of Users - (1) a provider must (a) make proper provisions for the health, welfare and safety of service users.

This requirement was made on 17 June 2019.

Action taken on previous requirement

There were children who may require medication whilst at service. Paperwork had been completed with parents on the children's return to the service but not all necessary detail had been completed. We advised that this be completed as soon as possible to ensure the children's safety and for staff knowledge and information in supporting the children. We have continued this requirement from the last inspection.

Not met

Requirement 2

Children should be safeguarded from harm by people who know and understand their role and responsibilities. The manager must improve their practice of recording and reporting concerns of abuse, to ensure appropriate procedures are carried out. This requirement must be met by 14 June 2019.

This is in line with the Health and Social Care Standards that state, I am listened to and taken seriously if I have a concern about the protection and safety of myself or others, with appropriate assessments and referrals made (HSCS 3.22).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011, 210 Regulation 4 Welfare of users (1) a provider must (a) make proper provisions for the health, welfare and safety of service users and (b) provide services in a manner which respects the privacy and dignity of service users .

This requirement was made on 17 June 2019.

Action taken on previous requirement

All staff had undertaken child protection training online since the last inspection. The manager and deputy had also undertaken a further module to support them in their roles as child protection officers. We spoke with staff who were able to talk us through the service procedure and what would concern them in regard to child protection.

The manager talked through the policy, procedure and the paperwork that would be completed should she have any concerns about children attending the service.

Met - within timescales

Requirement 3

Children should experience a high quality of care and support that protects, respects and empowers them. The manager should improve systems for auditing and reviewing paperwork to ensure the service is well managed. This requirement should be met by 14 June 2019.

This is in line with the Health and Social Care Standards that state, I use a service and organisation that are well led and managed. (HSCS 4.23).

This is in order to comply with The Public Services Reform (Scotland) Act 2010, section 53 Inspections (6) SCSWIS may at any time require a person providing any social service to supply it with any information relating to the service which it considers necessary.

This requirement was made on 17 June 2019.

Action taken on previous requirement

We saw that the quality assurance systems for the service were at a very early stage and discussed the importance of recording monitoring observations and using reflection and evaluation in identifying improvements. We have continued the requirement at this inspection.

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

Every child must have a tailor-made personal care plan that set out how their needs will be met, as well as their wishes and choices. The provider must have this in place for every child attending the service.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a child, 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).

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This area for improvement was made on 17 June 2019.

Action taken since then

All children had a personal plan in place which had been updated since the service had reopened in August. Additional information about children's feelings/emotions around Covid had also been gathered. We reminded the service that personal plans should be signed and dated by the parent along with the manager or staff member signing and dating.

The manager discussed her intention to develop a system to ensure the plans were routinely reviewed and updated when needed.

While this area of improvement has been addressed, we advised the service to develop personal plans further.

Previous area for improvement 2

Children should experience care from competent, skilled staff. The provider should improve the way staff's professional development is identified and reviewed to ensure it has a positive impact on children using the service.

This is in line with the Health and Social Care Standards that state, 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 17 June 2019.

Action taken since then

Whilst staff had undertaken training relevant to covid, infection control and hand hygiene, there had been no further training undertaken except child protection since the last inspection. We discussed the benefits of identifying staff training needs to further enhance knowledge skills and practice. We also discussed the benefits of staff and management reflecting on and recording the impact of training on practice.

This area for improvement has been continued at this inspection.

Previous area for improvement 3

Children's feedback should be used to shape improvement within the service. Staff should reflect on their improvement plan to measure the impact of any changes made.

This is in line with the Health and Social Care Standards that state, 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 17 June 2019.

Action taken since then

We saw that parental feedback had been obtained and was very positive. The service had also gathered children's views and suggestions on various areas of the service and had used different methods to record these. However, there was very little evidence to show how the staff had taken forward suggestions and ideas from children. The parent feedback had been collated and was to be used to involve parents in developing further methods around communication.

We have continued this area for improvement at this 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	3 - Adequate
5.2 Infection prevention and control practices support a safe environment for children and staff	3 - Adequate
5.3 Staffing arrangements are responsive to the changing needs of children during COVID-19	3 - Adequate

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