

# 'Me2' Service Day Care of Children

c/o Ashgrove Nursery Gillespie Place Aberdeen AB25 3BE

Telephone: 01224 482293

Type of inspection:

Announced (short notice)

Completed on:

11 February 2021

Service provided by:

Aberdeen City Council

Service no:

CS2014330627

Service provider number:

SP2003000349



# Inspection report

## About the service

This service registered with the Care Inspectorate on 10 February 2015. 'Me2' Service is a day care of children service provided by Aberdeen City Council.

The service provides care and support to children in three venues, Deeside Family Resource Centre, Ashgrove Nursery and Williamson Family Resource Centre.

'Me2' Service is registered to provide a service to a maximum of 34 children at any one time age from 2 years to an age to attend primary school. The manager also has responsibility for Ashgrove Nursery.

The aims of the service included to ensure that:

- Through inclusive, nurturing, caring and learning environments, children will be supported to become 'Confident Individuals, Successful Learners, Effective Contributors and Responsible Citizens' with a sense of well-being and a love of learning.
- Our relationships with parents and carers are open, honest and professional, and families are encouraged to share their skills and views and play an active part in their children's learning and in the life of the service.

We carried out a virtual inspection of 'Me2' Service between 26 January and 11 February 2021. We had virtual tours of the environments using 'Near Me' technology, spoke to the manager and staff and assessed relevant documents. We also contacted parents by email and telephone to obtain their views. Feedback was delivered to the manager on 11 February 2021.

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.

# What people told us

Six parents responded to our request for their views and gave their feedback which was positive. Comments included:

"I can't fault the service and help 'Me2's have given me and my child."

"My child absolutely loves the staff at this nursery, every morning they come out and welcome us all cheerfully and they always ask how both my child and I are feeling, which I find very warming in a time where we all need support!"

"They abide by the COVID rules which they have set out to us parents and it gives me confidence in knowing that my child is being cared for in the nursery in daily play but also within the COVID restrictions."

"I fully realise the complexity of the situation and how challenging arrangements and adherence to guidelines would be. With all that in mind I have had great communication with the staff there, I have received helpful suggestions via email of things to keep a two year old happy."

"Staff are approachable and welcoming, my child's development has really come on since they have been attending this 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?	4 - Good
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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?

4 - Good

5.1 Quality indicator 5.1: Children's Health and Wellbeing are supported and safeguarded during the COVID-19 Pandemic.

- -Children are nurtured and supported throughout their changed experience in their early learning and childcare setting
- -Effective communication with families enables responsive care to support children through changing circumstances.

Children were experiencing warm, caring and nurturing interactions from staff, supporting children's confidence and promoting their wellbeing. They were relaxed and comfortable in the environment and in their interactions with staff and each other. During the virtual observations children were engaged in their activities. Staff told us how observation and discussion of children's interests had been considered when deciding what resources should be available.

Settling in procedures were in place to support children in getting to know staff who were new to them. Arrangements were made to maintain links with existing staff members when children or staff were not able to attend the service. This supported children's relationships and attachments.

Staff had a good knowledge and understanding of the potential impacts of the pandemic for children and their families. This supported them in safeguarding children and supporting their health and wellbeing. Information about children's progress and care was shared at weekly team meetings, ensuring that the manager and staff knew of strategies in place to support children. Effective sharing of information between staff and parents promoted a continuity of care for children.

The manager and staff understood the impact that the pandemic and consequent restrictions may have on people using the service. Weekly calls were made by staff to offer support and share information with parents during lockdown. Parents told us how much they valued these contacts.

Working relationships with other professionals and agencies supporting families had been maintained by staff and the manager. This meant that families were able to access support in meeting any challenges they may experience when they needed it. Children's transitions were supported by the sharing of information with parents. For example, details regarding nursery enrolment and settling procedures.

Information about changes to the environment and routines such as hand over times were shared with parents prior to the service reopening. This enabled parents to prepare children for the changes and supported parents and children to understand the changes required. This supported children and their parents to feel confident in the revised arrangements. Families who were new to the service were invited to induction meetings in the garden and staff photos were shared at entrances to the venues. This supported children and their parents to feel confident and welcomed. The staff and manager continued to share information regarding any changes in guidance with parents via email, calls and in person as necessary.

Details of individual children's experiences were shared with parents via the online Interactive Learning Diary (ILD). This supported parents to feel included in their child's learning, parents were also able to add information about experiences at home. Information was also shared verbally at handover times and parents were encouraged to call if they wanted to discuss anything. This supported continuity of care for

the children and offered reassurance to parents if needed.

Quality indicator 5.2: Infection Prevention and Control Practices support a Safe Environment for Children and Staff.

-Children are protected as staff take all necessary precautions to prevent the spread of infection.

The staff and manager were familiar with the guidance on infection prevention and control and ensured that cleaning within the venues adhered to this. Consideration had been given to the time that this took. Session times were changed to ensure that surfaces and resources could be adequately cleaned between groups of children.

A review of resources available to children and the room layout had been carried out to support effective cleaning and prevention of infection. However, we discussed one area where this could be improved by the removal of unnecessary items in the cloakroom. The manager agreed to look into this immediately.

Children were supported to wash their hands effectively at appropriate times, further controlling the risk of infection. Staff supervised and encouraged children in this, building on their understanding in a gentle, age appropriate manner.

Children and staff maintained small groups, minimising children's contacts and therefore reducing the risk of the spread of infection. We discussed with the manager one situation where willingness to be flexible to a family's needs had meant this was not maintained. The manager agreed that this would not happen under the current policies and procedures where priority was given to maintaining the groups of children.

To support the control of infection, clear expectations were set around the need for children to remain at home when unwell. Information about symptoms of COVID-19 and the need to isolate until a test could be carried out were shared with parents. However, there were two occasions when suspected cases of COVID-19 were not notified to the Care Inspectorate. We discussed with the manager the importance of making these notifications and ensuring that all guidance was followed. The manager agreed to ensure that they followed the notification guidance in future.

Posters were used to remind parents to wear face coverings and maintain social distancing at handover times. Parents were seen to adhere to this guidance during our virtual visits. Staff also maintained a distance from each other and wore face coverings when not working directly with children. Break times and staff room layout had been changed to further support physical distancing between staff.

Risk assessments had been carried out for each venue. These identified areas where the risk of infection was higher and detailed the measures in place to reduce this risk to an acceptable level. However, the risk assessments did not always reflect the circumstances in the venues, for example the sharing of kitchen area, and measures in place there. We suggested that the manager reviewed the risk assessments to ensure that they accurately reflected the risks and control measures in place at each venue. This will allow the manager to monitor that controls are effective, working as planned and are updated appropriately when there are changes.

Quality indicator 5.3: Staffing Arrangements are Responsive to the Changing Needs of Children during COVID-19.

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#### Staffing arrangements meet the needs of children and families.

Staff were enthusiastic and committed to providing a high level of care to children accessing the service. The manager and provider ensured that there was enough staff to meet children's needs. There was an understanding of the impact on staff of the additional cleaning requirements and other tasks. This meant that time was planned across the day to ensure these tasks could be carried out without compromising the quality of care offered to the children.

Staff had a good understanding of their roles and worked well together in their teams. This meant that they were deployed effectively to support children and families.

At one venue two groups with low numbers of children had been joined together. This enabled the use of one room and promoted positive experiences for children in slightly larger group. However, to share the workload a rota was in place, which meant the staff team was not always consistent. We discussed this with the manager who agreed to look at how this could be improved.

#### Staff are well supported and confident.

Staff were confident in their roles and proactive in responding to changes in children's needs. The manager and provider recognised the potential impact of COVID 19 for staff and had measures in place to support staff to work from home and maintain contact with colleagues. This meant that they could continue to maintain relationships with families through calls and keep up to date with any changes at the service.

Staff had undertaken additional learning relating to supporting children during the pandemic. This included infection control and child protection issues specific to the pandemic. Staff were encouraged to access further learning to support them in developing their practice. However this learning was not always directly relevant to the current situation or staff training needs. We advised that the manager continue to encourage staff development but ensures that this is effective in building on staff knowledge and skills.

The development of an effective staff support and supervision system will support the manager in this, by ensuring she has a good overview of staff strengths and development needs.

# 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 provider and manager should review child protection systems and procedures to ensure the manager has an accurate overview of any concerns and actions taken to safeguard children. This allows the manager to monitor the provision of care and ensure that children receive the correct support to promote positive outcomes.

This is to ensure that care and support are consistent with Health and Social Care Standards which state that:

"I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities". (HSCS 3.20)

This area for improvement was made on 26 February 2020.

#### Action taken since then

In discussion the manager showed a good overview of any concerns and actions that staff had taken to promote wellbeing and safeguard children. This was supported through weekly team meetings. The manager was working on a recording system to ensure that she could effectively monitor these situations. This recomendation has been met.

#### Previous area for improvement 2

The provider and manager should ensure that robust self-evaluation processes and in place to monitor and evaluate staff practice and record keeping. The information should then be used to develop the service and promote consistently positive outcomes and experiences for the children.

This is to ensure that care and support is consistent with Health and Social Care Standards 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 26 February 2020.

#### Action taken since then

As this inspection focused on how services were supporting children during the pandemic, this recommendation was not assessed.

# Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	4 - Good
5.1 Children's health and well being are supported and safeguarded during COVID-19	5 - Very 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	4 - Good

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