

Little Flowers Nursery Day Care of Children

46 Glebe Street Renfrew PA4 8UA

Telephone: 01418 866 123

Type of inspection: Announced

Completed on: 18 February 2021

Service provided by: Little Flowers LTD

Service no: CS2005099039 Service provider number: SP2005007505



About the service

We carried out a virtual inspection between 15 and 18 February using 'Teams' technology and telephone conversations with staff and parents. We saw children being cared for at the service, reviewed the environment, a sample of children's personal plans and a range of written policies and procedures provided via e-mail. We gave feedback to the manager and provider on 18 February 2021.

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 two inspectors from the Care Inspectorate.

This service was registered with the Care Inspectorate on 1 April 2011.

Little Flowers Nursery is a Daycare of Children Service which operates from a converted villa with extension in the town of Renfrew, in Renfrewshire. It is located within walking distance of local schools, shops and bus routes. The service is in partnership with the local authority to provide Early Learning and Childcare.

The service operates Monday to Friday throughout the year. It is registered to provide care for a maximum of 82 children at any one time, within the following age bands:

No more than 9 are aged under 2;

No more than 17 are aged 2 to under 3 and;

No more than 44 are aged 3 to those not yet of primary school age;

The annexe may be used for a maximum of 12 children either aged from 3 years to not yet attending primary school or 12 children attending primary school.

The service's objective is to: The nursery's stated objective is: "to provide high quality childcare where the children feel happy, secure, safe and stimulated thus building their self-esteem and confidence to help them be well motivated and independent learners".

What people told us

We spoke with five parents as part of our inspection process. All were very happy with the quality of care their children received. They highlighted the improvements that had been made recently in terms of communication and information sharing. They felt that the service had been good about keeping in touch during closure and that this had made children's transitions back positive. Parents valued the information staff shared with them about their children's experiences and progress, and the ideas for learning to be extended at home. Parents were very happy with the range of activities and experiences their children accessed, and with the daily outdoor play opportunities. They felt that staff communicated effectively with them to gather information about children's learning and care needs and took good account of this. Parents found staff and management to be professional and welcoming.

Children told us about their experiences at the service, and what they understood about the changes to their routines because of COVID-19. They were happy and settled, had positive relationships with staff and each other, and had lots of fun. We observed children's non verbal communication with staff and saw that they were happy, secure and settled in 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?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the 4 - Good COVID-19 pandemic?

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

Children were happy, secure and having fun at the service. Staff had developed warm and nurturing relationships with children. Effective communication with families using a range of information technology had been established during the first nursery closure. Continuation of this supported positive relationships between staff and parents. Families valued the ideas staff shared for learning opportunities at home. They felt this had helped to maintain links with the service.

Effective information sharing about the changes to daily routines had resulted in positive transitions for children and their families. Ongoing communication with key agencies ensured that support was available to children and families facing challenges.

Children had adapted well to the changes in place due to COVID-19. They routinely washed their hands and had settled well into their 'bubbles' with consistent key staff and a smaller groups of children. Staff promoted links with home by regularly discussing children's family and home life with them. This supported children's emotional well-being and sense of self. Staff had adapted the space available to each group of children to provide a range of experiences and resources.

Children's right to make choices about their play and learning, for example whether they played indoors or outdoors, was supported by staff. Overall children enjoyed taking part in a range of activities and experiences based on their interests and preferences. There was potential to engage younger children further in their play and learning. Going forward the service should consider how to further develop children's access to a wide range of appropriate resources, particularly those that promote investigation and exploration, whilst continuing to adhere to COVID 19 guidance.

During our inspection many of the children enjoyed playing outside, in the nursery's large outdoor area. This helped to reduce the risk of infection and helped children to be active and healthy. The manager told us about plans to develop the outdoor areas. This will increase children's enjoyment and opportunities to learn from nature and living things.

Children enjoyed their lunches and snacks, supported in small groups by their key staff. We highlighted the potential going forward to develop opportunities for children to develop self help skills such as pouring. We also asked the service to consider providing real crockery and cutlery, particularly for older children and to review the daily menu in line with 'Setting the Table; National guidance and food standards for early years childcare providers in Scotland, 2015'.

Staff provided opportunities for children to share their thoughts and feelings during the Pandemic. Children had regular opportunities for discussions with their key workers, and used a feelings box and feelings tree to communicate their feelings. Staff were able to gauge and support children's understanding of current restrictions through observations of their play. An example of this was when one children made a service hatch for his café, explaining to the other children that they couldn't come in because it wasn't allowed. Children had regular opportunities to take part in yoga sessions, planned to help them relax and unwind. Going forward consideration should be given to further developing ways of assessing the impact of the pandemic on children's health and well being, for example through surveys and discussion with parents and children when reviewing personal plans.

Staff knew the children in their care well. They provided tailored support to meet children's individual needs. We sampled personal plans for three children. These were current and contained information about children's care needs and interests. The service had found effective ways of including parents in reviewing these. There was however potential to improve the way that the range of information the service held about children was recorded, to more clearly identify how the service was going to support children's learning and development, and how to record progress. The service should also consider how to more clearly link personal plans to the GIRFEC well-being indicators.

Children were protected from harm by staff who had a good understanding of their roles and responsibilities in relation to safeguarding and child protection. Staff had participated in child protection training received updates and were well supported by the manager to feel confident about their safeguarding and child protection practice. Staff told us that they had discussed the potential impact of the pandemic on families and were sensitive to family circumstances. The child protection policy is however lengthy and not easy to follow. Management should now review this, make amendments we suggested, and include reference to the potential impact of Covid 19 on families and children.

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

Children were protected from infection as staff followed current Scottish Government and other relevant guidance and took necessary precautions to prevent the spread of COVID-19. The manager had developed clear policies and procedures to support staff to limit the risk of the spread of infection. These included a COVID-19 risk assessment, hand hygiene and cleaning schedules and arrangements for limiting contact. Information about necessary changes to service delivery was effectively shared with parents. This helped to ensure everyone involved in the service was aware of their role and responsibility to keep children safe.

The environment and resources appeared clean and well maintained. Doors and windows were maintained open to increase natural ventilation. Appropriate resources were available to facilitate effective cleaning and hand hygiene. Children spent time outdoors every day, which they enjoyed and which helped to keep them safe and healthy.

Staff had received training on infection prevention and control specific to COVID-19. They reflected this in practice, for example through enhanced hand hygiene and by limiting contact between groups and each other. Toys and equipment were cleaned or quarantined in line with guidance. The range of soft furnishing and resources had been reduced and those that were still in use were regularly laundered. Staff were familiar with the guidance around the use of face coverings and we observed good practice in this regard. These measures reduced the risk of the spread of infection which helped keep children safe and healthy.

Going forward the service should review its written policies and procedures, including the COVID 19 risk assessment, as these did not fully reflect the service's current good practice or current guidance. These should be reviewed and amended where required. We discussed a few minor practice areas for improvement, which the manager committed to address. We also highlighted some examples where children and staff were potentially washing their hands unnecessarily. We felt that this had the potential to impact on children's quality of experience, and that it may be difficult to maintain when the nursery returns to full capacity. The manager agreed to review against guidance and the service's risk assessments.

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

Effective staffing arrangements meant that children's needs were met appropriately.

Consideration had been given to how staffing would be organised to ensure that the additional requirements in terms of cleaning and hand hygiene had limited impact on the quality of children's experiences. An example of this was that the service had purchased additional cleaning hours. We also saw that staff communicated well with each other to ensure that enhanced cleaning was carried out regularly throughout the day.

We observed warm and respectful relationships between children and staff. Staff described how they fostered positive relationships with parents, and how they had amended communication methods to sustain this through the Pandemic. These relationships underpinned good practice in communicating with parents regarding COVID-19 guidance and about how the service met children's individual needs.

The service had good arrangements for promoting and supporting staff health and well-being. Prior to reopening staff were consulted regarding any concerns or issues, and there were good examples of individual approaches to support some staff. Staff told us they valued the support provided by the manager and felt that they provided and received mutual support from their colleagues. Going forward consideration should be given to conducting a health and well-being survey to gauge how well supported and safe at work all staff feel.

Regular training and updates on best practice and guidance supported staff understanding of their roles and responsibilities in relation to COVID-19. The manager effectively monitored the impact of this training by observing staff practice and providing feedback through a range of formal and informal approaches. Staff were beginning to undertake peer reviews and plans were in place to further develop opportunities for these. Staff told us that they felt well supported to access relevant training and support. They said that they felt the manager was very supportive and approachable. We observed that this contributed to a positive and supportive ethos within the service.

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	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	4 - Good

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