

Crossbasket Nursery School Day Care of Children

Stoneymeadow Road Blantyre Glasgow G72 9UE

Telephone: 01698 720 039

Type of inspection:

Unannounced

Completed on:

1 April 2021

Service provided by:

Crossbasket Nursery Limited

Service provider number:

SP2014012308

Service no: CS2014326360



Inspection report

About the service

We carried out an unannounced onsite inspection of Crossbasket Nursery School on 24 March 2021. We then concluded the inspection remotely using virtual technology on 25 March.

We provided initial feedback to the manager and director on 26 March with further feedback relating to parent's views provided on 01 April.

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 two inspectors from the Care Inspectorate.

Our methodology for this inspection included:

- Observations of children's daily routines and staff practice
- Observations of infection prevention and control practice
- Interviews with the manager and staff team
- Telephone discussions with parents and carers
- Reviewing key records, policies and written procedures relative to COVID-19.

Crossbasket Nursery School registered with the Care Inspectorate on 22 August 2014 to provide a daycare of children service to a maximum of 107 children at any one time, aged from six weeks old to those not yet attending primary school. There were 96 children using the service on the day of our onsite inspection.

The nursery is a private organisation and works in partnership with South Lanarkshire Council, to provide funded places for early learning and childcare.

The service is located within the Crossbasket Estate in High Blantyre. The nursery is purpose-built with the accommodation all on one level. The children are cared for within five separate playrooms and each room has their own garden area. Some rooms had been temporarily adjusted to care for children in smaller groups in line with Scottish Government guidance. The children also have access to privately owned forest grounds, which are accessible from the rear of the nursery.

The aims and objectives of the service state 'While delivering a high level of childcare, implemented by highly trained professionals Crossbasket Nursery School's main ethos is to ensure that children have the best possible start in life through enriched outdoor learning experiences'.

What people told us

We spoke briefly to two children who were taking part in a forest school experience during the inspection. They told us that they were going to climb trees and that they came to the forest a lot. We observed children playing in each playroom and found that they were settled, happy and engaged in their play.

We spoke to thirteen parents by telephone during the inspection. Parents commented very positively on the quality of the care being provided to children. Communication was noted as being a particular strength and all parents noted that they received regular updates on their child through the nursery app. In addition, two parents told us that, although they had noticed a large turnover of staff, they felt new staff settled in quickly and they were kept up to date with any changes.

Parents provided some examples of how the strong links between the service and home benefitted their child. This included being responsive to changes in children's circumstances and varying the routine to ensure children could access the forest school experience when attending on a part-time basis.

Following our inspection visit, we were contacted by a parent who raised a significant concern regarding the care provided to their child in recent months. We liaised with the parent and the provider to establish the circumstances surrounding the concern. We found that the service acted quickly to resolve this concern and the parent agreed they were happy with the outcome.

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

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

We identified a number of key strengths that supported children's health and wellbeing during the COVID-19 pandemic. Emphasis had been placed on developing robust personal plans for each child. These were completed to a very good standard and supported staff to care for children based on their individual needs.

Parents had the opportunity to contribute to children's plans and spoke very positively about the level of engagement they had with their child's key worker, particularly during periods when the service was closed. As a result, staff were aware of any changes to children's circumstances and could plan for their care accordingly. We agreed with the manager that consideration would be given to ensuring all personal plans, particularly in the 3–5 rooms, focused on wellbeing strategies along with strategies to develop learning. This would ensure that consideration is given to the holistic development of all children.

Staff worked hard to provide a very nurturing and loving environment where each child was valued as an individual and where children's rights were respected. We observed staff working in each of the playrooms and saw that they were responsive to children's needs, which further supported the quality of care that was provided to children.

We found that there was a child-led approach to planning within the setting, which included the use of floor books and in the moment planning trackers to capture the play and learning experiences enjoyed by children. This meant that children were supported to follow their own interests and take part in activities that developed these interests further.

The nursery app, which was in place prior to the COVID-19 pandemic, was being used more frequently in light of the restrictions on face-to-face interactions between staff and parents.

Parents commented very positively on the updates and information they received about their child through the app. Use of the app meant that links were established between the child's home and the service, which contributed to strong relationships between staff and families.

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

We found that the service had good infection prevention and control measures in place.

We observed staff supporting children with handwashing to ensure it was effective, which reduced the risk of transmission of infection. Staff interacted with children in a sensitive and caring way when handwashing was required, which ensured that children were comfortable with their new routines.

Robust cleaning measures were in place, in line with current infection prevention and control guidance. For example, additional cleaning was taking place throughout the day and was closely monitored by senior staff and management to ensure it was carried out to a suitable standard. As a result of the increased cleaning of equipment and resources, the risk of transmission of COVID-19 was reduced.

The service benefitted from extensive outdoor play space, with all children having access to the outdoors, including dedicated forest space, for the majority of the day. This allowed children to play in a natural environment with opportunities for energetic, physical play and access to loose parts further enhancing the play and learning experiences enjoyed by children. We found that staff were also aware of maximising the use of the outdoors as a means of reducing the risk of transmission of COVID-19.

Adjustments had been made to some handwashing areas with multi-purpose sinks being used for handwashing to ensure each group of children had access to soap and warm water at all times. This had been risk assessed and sinks were cleaned between each use to limit the risk of cross contamination. We raised the possibility of increasing the use of children's level sinks in toilet areas, which would support children's independence in the handwashing process. The management team agreed to consider this as part of ongoing reviews of risk assessments and infection prevention and control measures.

Through observations we identified some areas where staff practice could be improved in relation to hand hygiene. For example, some staff opted to use hand sanitiser when warm water and soap was available and there was a common practice of touching bin lids without using the foot pedal. We discussed this with the management team who had also identified some of these practices through internal monitoring processes. We agreed they would continue to monitor and evaluate staff practice in this area, which would support appropriate infection prevention and control practices and reduce the risk of transmission of infection.

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

We found that good staffing arrangements were in place to ensure staff were responsive to children's needs.

We carried out observations of staff practice as part of the inspection and found that staff were deployed effectively and care and hygiene routines supported children's health, wellbeing, and safety. Clear rotas and staffing plans were in place, which meant that tasks such as lunch service and cleaning routines could be carried out without compromising the care of children.

All staff had undertaken training in relation to COVID-19 and other key issues including child protection. This effectiveness of staff training was being monitored by the management team with a range of auditing and evaluation processes in place, including staff quizzes and observation of practice. Our discussions with staff demonstrated that they had a good understanding of the current best practice guidance and were aware of the crucial role they played in keeping children safe during the pandemic. We were confident that staff were working hard to support children's health and wellbeing.

We noted that there had been a high level of staff turnover in recent times, which was also highlighted during our conversations with parents. Through interviews with staff, we found that robust induction processes were in place to support new staff and that staff were working hard to develop relationships with children. This meant that the impact on children's care as a result of staff changes was minimised.

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Adaptations had been made within the service to support physical distancing between adults. This included the use of screens in communal areas, front door drop-off and collection of children and reducing the number of staff accessing key areas such as offices and staff rooms.

Although these measures were adhered to, we identified instances where staff did not maintain a two metre distance when working in playrooms, which could increase the risk of transmission of COVID-19 within the setting. As this had been identified by the management team during their own internal audits, we agreed that this would be kept under review to ensure current social distancing guidance was adhered to at all times.

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 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
- Use of good practice guidance
- Impact of staff training
- Safe recruitment practices

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 2 August 2018.

Action taken since then

We found that a range of processes were being used to monitor and evaluate the quality of the service. This included observations of staff practice, quality monitoring calendars and tracking of children's experiences.

As a result, the management team were able to identify areas for development, which supported the overall capacity for improvement within the service. Therefore, we consider this recommendation to be met.

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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