

# Milton Community Nursery Day Care of Children

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Glasgow  
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**Type of inspection:**  
Unannounced

**Completed on:**  
16 April 2021

**Service provided by:**  
Glasgow City Council

**Service provider number:**  
SP2003003390

**Service no:**  
CS2003014833

## About the service

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

Milton Community Nursery is situated in the Milton area of north Glasgow. It is registered to provide a care service to a maximum of 87 children: 12 children aged from birth to under two years; 75 children aged two years to those not yet attending primary school, of whom 20 children can be under three years.

The service is provided by Glasgow City Council and is accommodated in a purpose built nursery within a shared campus. The service is close to main roads, bus and train routes, local shops, schools and parks. All playrooms have direct access to an enclosed outdoor play area.

The aims of the service include:

- To provide a happy and safe environment for children working in partnership with their parents and carers.
- To involve and maintain partnerships with schools, local agencies and the community to support children's learning and progress.
- To engage children in learning experiences that are stimulating, engaging, challenging, enjoyable and based on interests.

We started the inspection of Milton Community Nursery with an unannounced visit on Wednesday 14 April 2021. We continued the inspection virtually using Teams technology and telephone discussions. We concluded the inspection by giving feedback on Friday 16 April 2021 via Teams technology.

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. The inspection was carried out by two inspectors.

Our methodology for the inspection included:

- Observations of children's routines and staff interactions with children.
- Observations of infection prevention and control practice.
- Telephone discussions and email exchanges with the manager.
- Telephone conversations or emails with six parents.
- Virtual discussions with six members of staff.
- Reviewing key records, policies, and written procedures relative to COVID-19.

## What people told us

Seven parents contacted the Care Inspectorate via email and telephone to give their views of how the nursery had delivered care to them and their children during the pandemic. All of them were very happy with the nursery although one would have preferred fuller information within their child's progress report. Parents believed that nursery staff had communicated well with them during the COVID-19 pandemic. Any updates to public health guidance and nursery practice was shared quickly with them. This had given parents confidence that their children were safe and being well cared for. Parents shared examples of the activities and materials that they had been given by staff to support their children's learning at home. This had included staff singing to children and telling them stories on secure social media pages.

Parents felt that this helped children to maintain positive relationships with staff. They liked that children's transitions back to nursery from periods of lockdown as well as between nursery playrooms were well planned and supported. This meant that children quickly settled and were happy.

## 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.**

- 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.

We found the service to be operating to a very good level under this indicator. The setting promotes nurture principles and we observed warm, nurturing approaches from staff towards children. Staff knew children's individual personalities, needs and interests well and engaged them in fun activities both indoors and outdoors. This helped ensure children's personal development and care needs were met.

There were very good examples of the nursery supporting the whole family through the challenges of the pandemic and working with the community to do so. For example by delivering food parcels. Parents appreciated communication from service staff during periods of closure but also felt respected that they could determine the level of contact. Maintaining relationships with staff contributed to children settling well into the setting when it fully reopened.

We could see that children had opportunities to shape their play and learning experiences and were supported to understand the changes to their nursery day due to the virus. One parent shared their worries around talking to their child about COVID-19 in a way that matched their level of understanding. They had been impressed about how staff used activities and conversation to ensure children understood but were not 'terrified' at the prospect of the virus. This contributed to children feeling safe and secure.

Children were protected from harm by staff who understood their roles and responsibilities in relation to child protection. The service had appropriate arrangements to work with other agencies to support children's welfare and safety. Staff had participated in child protection training during the pandemic to make sure they felt confident about addressing any new areas of concern about children. This included reference to Scottish Government's Coronavirus (COVID-19): supplementary national child protection guidance.

**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.

We found the service to be operating to a good level under this indicator. Risk assessments in keeping with national COVID-19 guidance had been undertaken both by the service provider and by the service. For example, the manager had introduced different entrances for each of the playrooms to limit close contacts. Staff and parents were aware that they should maintain a two metre physical distance from each other and there were markings on the floor near entrances to encourage this. Parents told us they felt informed about practice related to COVID-19 and were given regular reminders of their responsibilities when bringing their child to the setting, including to wear face coverings. These measures minimised the risk of transmitting the virus between people.

Staff usually wore face coverings when attending to parents at the playroom entrance doors. We observed instances where this practice was lax and encouraged the manager to continue with their plan to include face covering etiquette at the forthcoming staff training day.

All areas within the setting were ventilated by keeping windows open and staff maximised the use of outdoor play for children, which helped limit the risk of infection and enhanced everyone's sense of wellbeing. Careful planning of staff breaks and the introduction of separate staff rooms supported social distancing thus keeping staff safe, but also comfortable.

Smaller group sizes of children, 'bubbles', enabled staff to build nurturing relationships with children and helped reduce the risk of cross infection. We liked that the bubbles were regularly reviewed to ensure they were responsive to the changing setting context and needs of children. We observed that children were supported to follow good hygiene procedures. They were encouraged to wash their hands regularly. We noted that there was not a child height sink in each playroom, although acknowledged that this was sometimes because rooms had been sub-divided to support children being cared for in bubbles. The provider should keep this under review in any future refurbishment plans. This is because promoting independence in good hand hygiene prevents infection and is an important part of children learning about healthy lifestyles.

We found that children and staff were exposed to potential risk from infection as temporary contract cleaning staff working within the setting were not familiar with up-to date guidance on infection prevention and control in respect of COVID-19. For example bins used for paper hand towels were not lined and some floors had a build up of dust and debris from ineffective sweeping. One broken bin had not been removed and taped edges on other equipment made them more difficult to clean. The manager agreed to continue to liaise with the contractor to ensure cleaning schedules are based on good practice guidance and carried out when needed. This includes when there are any changes to cleaning staff teams. (Please see area for improvement one). Nursery staff should also be vigilant about reporting when additional cleaning is needed to prevent spread of infection and keep everyone safe.

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

- **Staffing arrangements meet the needs of children and families.**
- **Staff are well supported and confident.**

We found the service to be operating to a very good level under this indicator. Parents spoke highly of the support offered by staff to both their child and themselves during the pandemic. They believed staff were sensitive to their child's needs and wishes, which helped them achieve their full potential.

The setting was appropriately staffed to meet the individual needs of children attending. Staff deployment took account of the additional cleaning responsibilities that staff had been given and ensured that these did not impact on the quality of children's care. The manager was in the process of reallocating staff to ensure a better balance of experienced and newly qualified staff in each of the playrooms. They should continue with these plans as it will enable sharing of good practice and increased staff confidence in their role.

Staff demonstrated a positive ethos towards their work, were confident in carrying out expectations of them during the pandemic and felt supported by their team. Staff told us they were also well supported by the manager, who was very approachable.

The manager had made very good use of team meetings, informal communication and digital technology to support staff and give them an opportunity to share their views. Staff had participated in COVID-19 training specific to early learning and childcare as well as topics to support positive outcomes for children. We were impressed that some staff had independently identified professional development that would help them support children's emotional wellbeing during these challenging times. Following a COVID-19 outbreak in the setting, the manager helped staff individually to review their knowledge and understanding of current guidance and practice in relation to COVID-19 before returning to work. This contributed to staff wellbeing as well as everyone's safety.

## Areas for improvement

1.

The manager should ensure that infection prevention and control measures are being implemented effectively. They should continue to liaise with the cleaning contractor to ensure cleaning schedules are based on good practice guidance and carried out when needed. This will help reduce the potential risk of infection to people using the service.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

## 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	5 - Very Good

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