

# Milnathort Primary School Nursery Day Care of Children

Milnathort Primary School  
Bridgefauld Road  
Milnathort  
Kinross  
KY13 9XP

Telephone: 01577 867 260

**Type of inspection:**  
Unannounced

**Completed on:**  
27 April 2021

**Service provided by:**  
Perth & Kinross Council

**Service provider number:**  
SP2003003370

**Service no:**  
CS2003017338

## About the service

The nursery operates from a separate building within the grounds of Milnathort Primary School. The playroom is open plan with an area dedicated for Strong Start 2's. The children have free flow access to the nursery garden.

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 01 April 2011. The service is registered to provide a care service to a maximum of 53 children aged two years to those not yet attending primary school.

We wrote this report following an unannounced, focussed inspection which evaluated how well children were being supported during the Covid-19 pandemic. We carried out the inspection using a blended approach of virtual and onsite scrutiny. We started the inspection on 20 April 2021 and gave feedback to the management team on 27 April 2021.

The nursery aims include:

- I want to learn skills for life and work now and in the future.
- I am excited by new experiences and challenges.
- I care for myself, others and the world I live in.
- I have a sense of belonging and a part to play in an ever-changing world.

A full list of aims are available from the service.

## What people told us

We spoke with three parents by telephone call. Overall parents were happy with the quality of care provided and welcomed the communication the service had with them during the lockdown period.

Comments made included:

'(Child) never stops, full rundown of events and very fond of the staff 'take a photo of this and send it to (staff), she will be so proud of me!' all the time.'

'Best bit is the approachability of the staff, great bunch of kids. (Child) is happy in that environment, clearly enjoys being there, never any negatives.'

'(Child) tells me on the way home likes being outside and loving the mud kitchen, does tend to play with one friend and will play with others, kittens and cats and the dinosaurs.'

'It's mostly circumstance but it would be lovely to see (child) go in and help in the cloakroom, nobody's fault. It will be lovely when they can show us around again and we can see what (child) plays with.'

We saw that children had fun and were engaged in their play. Children spoke with us during the inspection and told us:

'It's a pirate ship- it has two ladders.'

'We have to beat the timer.'

'We're trying to water the plants.'

'This pump is easy.'

'We wash them (hands) before we eat.'

'Love monsters help me with feelings.'

## 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?	2 - Weak
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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?

2 - Weak

### 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.

Children experienced nurturing and caring interactions from staff which supported them to form positive relationships. The play areas enabled children to make choices and promoted opportunities for risky play in the outdoor area. Children were confident and happy in the service with many children happy to talk with us about their nursery.

Children were supported to understand the need for change within the nursery, this helped them feel safe upon their return from periods of time away from the nursery. The nursery used various methods to support this including videos and staff contact during lockdown periods.

Cohorts had been carefully considered to allow friendships of children and for children to remain with their key workers. This promoted continuity of care and supported their return to the service, particularly for those children requiring additional support.

Children had settled well into the setting after periods of time away. The introduction of 'see-saw' had provided increased opportunities for communication between children and families with the nursery. Parents commented that this had strengthened the communication between themselves and the nursery, ensuring children and families felt included.

We recognised that staff had spoken with families to gain up to date information on children's needs during Covid-19 lockdowns. However, the information gathered was not formally recorded. Information should be recorded in children's personal plans to ensure that all staff have the correct information about children's current needs and can meet them effectively. **(See area for improvement 1).**

Effective systems were not in place to ensure medication was safely managed. On the day of inspection, the staff were unable to provide us any written consents for medication. The deputy headteacher advised that medication had been accepted into nursery with only verbal consent which does not follow current best practice guidance. **(See area for improvement 2).** There was no effective quality assurance in place regarding medication. As a result, we found out of date medication and medication that was no longer required. **(See requirement 2).**

## 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 playrooms were visibly clean and tidy and we saw staff carrying out regular cleaning of high touch points whilst onsite. The nursery was maximising the use of the outdoor area throughout the day minimising the risk of transmission of Covid-19.

The nursery had taken account of children's arrival and departure times and access routes. This supported parents social distancing and limited the crossover of children within their bubbles. This minimised the risk of infection across the cohorts of children.

Through discussion staff demonstrated knowledge of the guidance that they should follow to reduce the risk of infection. However, this was not consistently reflected in their practice, increasing the risk of transmission of Covid-19. We noted issues in relation to children and staff's handwashing practices. For example, staff did not wash their hands in line with guidance or frequently enough, children did not always wash their hands for the appropriate time or when they should be. Staff wore face coverings but were not following guidance on the donning and doffing of these to prevent transmission of Covid-19. For example, staff touched their masks, pulling them to one side to talk and wearing them below their chin. **(See area for improvement 3).**

Effective systems were not in place to monitor consistency in infection prevention and control practice. As a result, this led to inconsistencies in practice which were not identified and addressed, this increased the risk of spreading infection. **(See requirement 2).**

## 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.

Staff were dedicated and keen to provide quality care for the children. We saw positive interactions between staff and children that supported children to build trusting relationships. The management team had provided opportunities to support staff throughout the pandemic such as, creating wellbeing check ins and offering supportive discussions. The majority of staff we spoke with felt supported by management, this contributed to a positive ethos in the service.

During some periods of the session staff were not effectively deployed and at times there were insufficient staff to meet the needs of the children. As a result, we saw some children were not effectively supported over the lunchtime experience and the period following lunch. Staff were required to undertake additional infection control practice to reduce the risk of transmission. Staff told us that the additional tasks being asked of them meant that the time spent with children was compromised. As a result, this impacted negatively on the quality of children's experiences. **(See requirement 1).**

Effective quality assurance systems were not in place. The management team confirmed with us that no formal audits had been undertaken of staff's practice and compliance with Covid-19 guidance. This resulted in the areas identified throughout the inspection not being recognised and addressed by the management team. All staff had undertaken infection prevention and control training. However, systems were not in place to ensure staff had a shared understanding and implemented their learning into practice. The lack of quality assurance had resulted in the issues with the deployment of staff not being identified and actioned. **(See requirement 2).**

## Requirements

1. To ensure that children's care and wellbeing needs are met and they get the right support at the right time, the provider must ensure that staff are deployed effectively throughout the day.

This must be achieved by: 31 May 2021.

This is to ensure that care and support is consistent with Health and Social Care Standards, which state that: 'My needs are met by the right number of people.' (HSCS 3.15).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/10) Regulation 4 (1)(a)(b) Welfare of Users.

2. To ensure improvements are made that have a positive impact on the outcomes for children, the provider must ensure effective and robust quality assurance processes are developed and implemented.

This must include:

- (a) Monitoring staff practice to ensure infection prevention and control measures are carried out in line with current government guidance.
- (b) Monitoring staffing arrangements to ensure that children's individual needs are met.
- (c) Audits of records and medication stored on the premises.

This must be achieved by: 15 June 2021.

This is in order to ensure care and support is consistent with the 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).

It is also in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/10) Regulation 4 (1)(a)(b) Welfare of Users.

## Areas for improvement

1. To ensure each child receives appropriate care and support and their needs are met the manager and staff should:

- a) Ensure personal plans set out children's current needs and how they will be met
- b) Ensure all staff are aware of and understand the information within the personal plans and use this to effectively meet each child's needs.

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

2. In order to ensure that medication is safely managed, the provider and the manager should review best practice guidance; 'Management of medication in day care of children and childminding services' and ensure:

- a) Medication is stored appropriately.
- b) Recording formats contain all essential information to support staff to safely administer medication.
- c) Written permission is in place for all children's medication in the service.

This is to ensure that care and support is consistent with Health and Social Care Standards, which state that: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

3. In order to reduce the risk of the spread of infection during the pandemic, staff must ensure they are consistently complying with Scottish government guidance.

This should include:

- a) Staff work with children to improve handwashing practice.
- b) Ensuring children and staff hand washing is carried out at appropriate times.
- c) Staff wearing masks appropriately.

This is to ensure that care and support is consistent with Health and Social Care Standards, which state that: '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?	2 - Weak
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	2 - Weak

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