

# Balmore Kindergarten Day Care of Children

47 Glentamar Road  
Balmore Industrial Estate  
Glasgow  
G22 7XS

Telephone: 01413 364 111

**Type of inspection:**  
Unannounced

**Completed on:**  
2 June 2021

**Service provided by:**  
Balmore Kindergarten Limited

**Service provider number:**  
SP2010011273

**Service no:**  
CS2010275624

## About the service

Baltimore Kindergarten has been registered with the Care Inspectorate since May 2013. It provides a care service to a maximum of 124 children across the following age groups:

- 12 children aged 0 to two years
- 24 children aged two to three years
- 56 children aged three years to those not yet attending primary school.
- 32 children of primary school age. Children due to commence primary school in the August term can be cared for by the service in the preceding summer holiday period.

The service is provided by Baltimore Kindergarten Limited and operates from refurbished accommodation within an industrial estate in the north west of Glasgow. The service has sole occupancy of the building and has its own secure outdoor play areas where children can enjoy energetic play in the fresh air.

The service is in partnership with Glasgow City Council to provide early learning and childcare for 3-5 year old children.

Baltimore Kindergarten's main aims are:

- To provide the highest quality early years experience for children and families.
- We work hard to deliver interesting, exciting and imaginative learning experiences which are purposeful for both indoors and outdoors.
- We encourage children to achieve their full potential as successful learners.
- Practitioners foster and develop caring, sharing and positive behaviour as role models in words and actions throughout the nursery.
- We support children as they become successful learners and grow in confidence, becoming more self-assured and responsible citizens that are effective contributors in our society.

We started the inspection of Baltimore Kindergarten with an unannounced visit on Wednesday 19 May 2021. We continued the inspection virtually using Teams technology, telephone discussions and email communication. We concluded the inspection by giving feedback on Wednesday 2 June 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 nine parents.
- Virtual discussions with seven members of staff.
- Reviewing key records, policies, and written procedures relative to Covid-19.

## What people told us

We asked the service to pass our contact details to parents so that they could share their experience of how the nursery had delivered care to them and their children during the pandemic. Five parents agreed to be contacted and we gave the option of receiving email prompts or a telephone call at a mutually agreed time. We spoke to one parent on the phone and another responded to our email. At the time of drafting this report there had been no further contact from the other three parents. Both parents who responded to us were highly satisfied with the quality of care provided by the nursery and praised the professionalism of staff. They believed that there were appropriate measures in place to keep everyone safe.

Examples of parents' comments included:

"My child started nursery just in March so luckily we didn't have to go through the process of on and off as much as the other kids but my experience with Balmore Kindergarten so far has been amazing being a first time mum the nursery process was a bit daunting but I can't fault the girls at all. I watch the nursery Facebook regularly and I am well aware of the boundaries the nursery have set and why but again overall I couldn't fault any of them they have a great team and have the time and patience for anything whenever you need them, If you asked me for a rating out of 10 I would give a strong 11!"

"My child has attended since August 2020. They told us about how the nursery was operating bubbles. All the measures are really good we have to wait outside and then I usually check there is someone upstairs before I take my child up. You have to wear masks and use hand sanitiser before going into the building but I feel it is 100% safe. At the end of the day the staff give us a sheet, which has what activities and routines he's been involved with and what he has eaten. There is a parent group on Facebook which is private and we can see photos and information about nursery on there. During lockdown staff emailed to see how the children were and they offered support, for example if you were struggling."

## 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?	3 - Adequate
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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?

### 3 - Adequate

**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.

From the evidence gathered during the inspection, we evaluated the service as adequate under this indicator. We observed that older children were happy and settled in the nursery environment and had developed an attachment with staff in their group. Homely routines, such as nutritious meals meant that children were nurtured. We particularly liked the water stations that meant children could easily access their individual water bottle to keep them hydrated throughout the day, without any risk of cross contamination.

Children of all ages had opportunities for play and learning experiences outdoors in the fresh air, thus helping to minimise the risk of Covid-19 transmission. For older children this sometimes meant taking advantage of local amenities such as school playing fields. We asked the management team to continue to review how they maximised outdoor experiences for children, including free flow access from their playroom. This is so that everyone benefits from natural play that offers challenge, interest and enjoyment. The manager intimated that the nursery had recently secured a grant for outdoor resources and staff training. They should continue with these plans.

We felt that the quality of experience in the baby room could be overwhelming for babies, staff had to raise their voices to be heard over nursery rhymes playing loudly in the background. When we arrived for our inspection visit, the staff ratios in the baby room made it difficult for staff to support babies, for example while they had their breakfast. We acknowledged that there had been unexpected staff absences on the day of our visit but have made a requirement about staff ratios under 5.3.

Parents were happy with the communication they had with the nursery both during periods of lockdown and when their child re-joined the nursery. Parents felt well informed about the measures in place to keep children safe and healthy. Regular social media posts and telephone calls helped parents to feel included and gave them opportunities to contribute to their child's personal plan.

Parents were confident that they could share information about their child's individual needs with staff so that children received the right support with their care, learning and development. There was a new format for children's personal plans, which potentially could provide a tool to support staff observations of children. However there needed to be more consistency in the staff approach to observations and planning across different age groups of children. We have made a new area for improvement for management to monitor staff practice under 5.3. This will make sure that children's personal plans are up-to-date, regularly reviewed and reflect children's rights, choices and wishes as well as their changing needs during Covid-19.

Staff we spoke to demonstrated a clear understanding of their responsibilities to protect children from harm. We asked the manager to review the nursery child protection policy to take account of the impact of Covid-19. Scottish Government published 'Coronavirus (Covid-19): supplementary national child protection guidance' in March 2020. This guidance can be found here: <https://www.gov.scot/publications/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.

From the evidence gathered during the inspection, we evaluated the service as adequate under this indicator. The environment was generally clean and there was sharing of cleaning responsibilities between contracted cleaners and nursery staff. For example staff could tell us about how toys were regularly cleaned to reduce any risk of transmitting the virus. There had been no significant outbreaks of Covid-19 during the pandemic.

We observed physical distancing between staff to help mitigate the risk of cross infection within the nursery. Children were cared for in groups or 'bubbles' as recommended in national guidance although we discussed with staff children staying in their bubbles when outdoors too. We noted that there were occasions when staff covered more than one bubble, which increases the number of close contacts were there to be case of Covid-19.

Staff knew about the importance of hand hygiene to prevent transmission of Covid-19 and there were prompts displayed about this throughout the setting. Children were being encouraged by staff to wash their hands at appropriate times, with younger children mainly supervised during this task. Hand sanitisers were strategically based for adult use throughout the setting although these needed to be monitored to ensure they were replenished. We could see there were plenty of bins for used hand towels but staff also needed to be vigilant about monitoring where these were broken, unlined or unlidded. For example we saw one bin without a lid where used face coverings had been disposed. This posed a risk of cross infection. The management team assured us that bins had been replaced by the end of the inspection process.

While staff wore face coverings at appropriate times to reduce the risk of adult-to-adult transmission of Covid-19, they were not all familiar with the guidance for safely putting these on, taking them off and storing them. Scottish Government guidance can be found here: <https://www.gov.scot/publications/coronavirus-covid-19-public-use-of-face-coverings/pages/wearing-a-face-covering/>

Not all staff were vigilant about ensuring good ventilation by keeping windows open as much as possible. Ventilation is a key mitigation factor in minimising the risk of transmission of the virus.

We noted that some of the above pointers were included in the nursery's Covid-19 risk assessment although the document did not reflect changing national guidance. We had previously signposted the manager to relevant Scottish Government and public health guidance. We asked the manager to ensure that the risk assessment was responsive to the evolving needs of children and of the service during the pandemic. We recommended that they involve all staff in developing the risk assessment as this would help make sure it was relevant to their context and easily understood. (Please see area for improvement one.)

## 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.

From the evidence gathered during the inspection, we evaluated the service as adequate under this indicator. The service had a change of manager during the pandemic who had worked with the depute to implement systems that adhered to national Covid-19 guidance. Staff told us they felt well supported by the management team, who were very approachable. They believed they had been provided with relevant information and training to help them feel safe on their return to work following lockdown. Careful planning of staff breaks and the introduction of separate staff rooms supported social distancing thus keeping staff safe.

On the morning of our inspection visit we noted that a combination of staff absence, holidays and shift patterns had impacted on staff child ratios in the baby room. We found ratios to be insufficient to ensure the safety and well-being of the babies and have made a requirement. (Please see requirement one.) We discussed with the management team how having a clearer staff absence contingency plan would help the team avoid similar situations in the future. They should also ensure that the staff skills mix is spread within each playroom as well as across the service.

We asked for more formal feedback on Covid-19 practice to be discussed with staff on a regular basis. For example to include staff in updating the risk assessment for the nursery and to support them in planning for children's individual care. This would help the team to identify how they are doing during the pandemic, how they know this and what they are going to do next to improve their practice. (Please see area for improvement two.)

## Requirements

1. By 30 July 2021, the provider must ensure that children's needs are being met by enough staff who have the experience and skill to care for them.

In order to achieve this the provider must ensure that staff deployed in each of the nursery playrooms have the skill and experience to meet the individual needs of all children.

This is to ensure care and support is consistent with Health and Social Care Standards, which state that: 'My needs are met by the right number of staff' (HSCS 3.15), 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11), and 'I am supported and cared for by people I know so that I experience consistency and continuity' (HSCS 4.16).

This is in order to comply with Regulations 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI/2011/210) Make proper provision for the health, welfare and safety of service users.

## Areas for improvement

1. In order to ensure that children's health, safety and wellbeing is not compromised, the provider should ensure risk assessments are effective and working as planned to support appropriate infection prevention and control during the pandemic. These should be clear and easily understood by all people involved in the service. Staff involvement in developing the risk assessments would support this to be a shared approach and impact positively on the health and safety of everyone.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'My environment is secure and safe' (HSCS 5.17).

2.  
In order to ensure staff are clear about their roles and are deployed effectively, the manager should support and monitor staff practice. This should include supporting staff understanding of guidance and procedures related to Covid-19.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14), 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'I benefit from a culture of continuous improvement with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

In order to ensure that children are safe and healthy, the manager must by 28 June 2019, ensure that medication is regularly reviewed with parents/carers. Consent forms and related guidance must be completed for each medication that is stored within the service. Staff should be vigilant to any conflict between prescribed dosages, manufacturers' recommended dose and parents' instructions.

The manager and staff should refer to the Care Inspectorate's publication: Management of Medication in Daycare of Children and Childminding Services (2014).

This ensures care and support is consistent with the Health and Social Care Standards which state that, as a child: "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - regulation 4(1)(a).

**This requirement was made on 18 May 2017.**

#### Action taken on previous requirement

The service had updated their medication policy and related paperwork. Staff had received training on completing medication forms, which included that only senior and qualified staff members were to administer medicine to children. We considered this requirement to have been met but have included management monitoring practice as a new area for improvement under section 5.3 of this report.

**Met - within timescales**

#### Requirement 2

In order to ensure that children are safe and protected the provider must by 28 June 2019, ensure that at all times staff have been safely recruited. The provider must ensure that safe and robust procedures are put in place for the recruitment of new staff. This must include:

- \* a 'Protection of Vulnerable Group' membership or scheme update has been sought prior to staff commencing employment in the service.
- \* two up to date and relevant references, are obtained prior to staff commencing employment within the service.



\* registration with the Scottish Social Services Council (or appropriate professional body) is in place within 6 months of staff commencing employment and monitored by management thereafter.

This ensures care and support is consistent with the Health and Social Care Standards which state that, as a child: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This is to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 2011/210 Regulation 9(c) any person to whom regulation 7(2) (d) apply. Fitness of employees, and Regulation 13(1) apply. Protection of vulnerable groups listings.

**This requirement was made on 8 January 2019.**

#### Action taken on previous requirement

The service had updated their safe recruitment policy and devised a personal check list for each staff member, including details dates of telephone calls/emails to referees, and date references are received, date of PVG and SSSC registration, start date of staff member. The manager also explained the new induction programme for staff to familiarise them with their role and responsibilities, including during the pandemic. We considered this requirement to have been met but have included management monitoring practice as a new area for improvement under section 5.3 of this report.

**Met - within timescales**

## 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

Management and staff should continue to develop the format of children's personal plans. All entries in the plans should be dated and the review of plans needs to be formalised to show they are undertaken every six months or sooner if necessary.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a child: "my future care and support needs are anticipated as part of my assessment" (HSCS 1.14) and 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).

**This area for improvement was made on 21 May 2014.**

#### Action taken since then

Parents were confident that they could share information about their child's individual needs with staff so that they received the right support. There was a new format for children's personal plans, which potentially could provide a tool to support staff observations of children's learning and development. However there needed to be more consistency in approach across age groups of children. We considered this area of

improvement to have been met but have included management monitoring practice as a new area for improvement under section 5.3 of this report.

## Previous area for improvement 2

Management should support staff to effectively use observation and assessment information when recording how they plan to meet children's care, learning and development needs.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a child: "My future care and support needs are anticipated as part of my assessment" (HSCS 1.14), "I am supported

to achieve my potential in education and employment if this is right for me" (HSCS 1.27) and "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

**This area for improvement was made on 18 May 2017.**

### Action taken since then

One of the team leaders had studied a module on observing children as part of her BA in Childhood Practice and was cascading her learning to staff. However we found that some staff needed more confidence in conducting spontaneous observations of children rather than doing the same planned observations with more than one child. We considered this area of improvement to have been met but have included management monitoring practice as a new area for improvement under section 5.3 of this report.

## Previous area for improvement 3

The manager should work with staff and, where appropriate, children to review the promoting positive behaviour policy. They should ensure that references to restraining children are removed. The manager should also continue with plans for staff to participate in professional development around promoting positive behaviour so that they are confident in supporting the safety and wellbeing of children.

The manager and staff should refer to The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) - Regulation 4(c) - Welfare of users.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a child: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14) and "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 10 April 2019.**

### Action taken since then

The manager had immediately reviewed the service Positive Behaviour policy with references to restraint removed. Staff were supported in their understanding of promoting positive behaviour with children. This area for improvement had been met.

## Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
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	3 - Adequate

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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