

# First Adventures Nursery - Turret Towers Day Care of Children

Turret Towers  
53 High Street  
Linlithgow  
EH49 7ED

Telephone: 01506 844 344

**Type of inspection:**  
Unannounced

**Completed on:**  
18 June 2021

**Service provided by:**  
First Adventures Nursery

**Service provider number:**  
SP2003002958

**Service no:**  
CS2003012063

## About the service

First Adventures Nursery - Turret Towers was registered with the Care Inspectorate on 1 April 2011. They are registered to provide a care service to a maximum of 59 children aged from birth to five years, with a maximum of 18 children under two years.

The service is provided by First Adventures and located in the centre of Linlithgow. It is in partnership with West Lothian Council and offers funded childcare to eligible children. The nursery is accommodated on two upper levels of the building. Part of the ground floor is currently being developed to offer additional play space. A large, exciting and well-planned garden area is available to the rear of the property.

The service had recently reviewed their aims in consultation with parents, these included:

- To progress our children in the key aspects of learning and development, intellectually, creatively, emotionally, and socially - appropriate to their age and stage, at their own pace and in the context that each child is a special individual.
- To foster an ethos of fairness and equality where everyone involved feels welcomed, valued, and included in the life of the nursery and to develop strong interpersonal relationships within the nursery and the wider educational and local community.

We carried out an unannounced onsite inspection of the service on Tuesday 15 June 2021. We continued the inspection virtually using Microsoft Teams technology and telephone discussions. We concluded the inspection by giving feedback on Friday 18 June via NHS Near Me 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. This inspection was carried out by two inspectors from the Care Inspectorate. 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 staff.
- Reviewing key records, policies, and written procedures relating to Covid-19.

## What people told us

Six 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. Feedback was positive, with a couple of suggestions to consider for improvement. Parents particularly praised the way the service responded during the pandemic and the changes put in place to keep everyone safe. Parents appreciated the addition of the outdoor lodge in the wild woods area of the garden and recognised the benefits of their children being outdoors more. One parent said, "This is of huge benefit to my child from a health, wellbeing and developmental point of view."

Similarly, parents appreciated the use of technology to keep them informed and staff posting home learning activities and videos during lockdown.

There was a suggestion for the service to consider resuming walks in the community. We informed management of this suggestion.

We observed children to be happy and engaged in the service with lots of opportunities for child-led play being available throughout the sessions. We saw curious children who had their ideas and interests listened to and taken forward. As a result, they confidently approached staff with requests or when they needed assistance.

## 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.

Planned learning opportunities supported children to understand Covid-19 and why there were changes to routines and experiences. Older children returned from the first lockdown with some knowledge about the virus. They asked questions and were keen to discuss. This prompted a learning focus about germs. Children learned about different types of germs and how they can affect everyone differently. Staff used fun and imaginative ways for children to explore and learn about germs, such as growing mould on bread.

In line with Covid-19 guidance, parents were not able to come into the service, however the use of technology kept them fully informed and included. The service used 'ClassDojo', a communication App which connects staff, parents and children allowing the sharing of photos, videos, and messages. It was used to send private or group messages. Staff told us that they messaged parents during the session to provide reassurance when required.

Effective communication with families meant that children's needs were supported through changing circumstances. For example, a questionnaire was sent to all parents before children returned from lockdown, this helped staff to be informed about children's current needs and interests and supported them to provide appropriate experiences when children returned. Virtual transition meetings and video show tours further supported new children and children returning from lockdown.

Every child had a personal plan which was regularly reviewed and reflected the child's rights, choices and wishes as well as their changing needs during Covid-19. We suggested the service could consider reorganising the layout of the plan to make it easier to find recent information. This would ensure that staff were clear about children's current needs to provide appropriate support. Management took this suggestion on board and were committed to making the changes.

Where children had any allergies or health needs, this information was documented as part of their personal plan. We advised that management could consider developing a consistent approach to recording this information to clearly outline the signs, symptoms and stepped approaches that may be needed to support individual children.

The service benefitted from a large exciting outdoor space which offered a wide range of activities to support a healthy lifestyle. Due to the service adhering to Covid-19 restrictions, some outdoor activities were restricted for two cohorts. We suggested that the service consider how they could organise outdoor play areas to ensure that all children had opportunities to explore and make choices. The entrance to the outdoor play space required to be reviewed and remedied to ensure that children were kept safe. The provider confirmed that they planned to secure the gate and that a keypad would be fitted. We suggested that when securing the entrance to the outdoor space, management could take this opportunity to consider how they could reduce the number of parents accessing the outdoor areas during the pandemic. This would keep children protected from harm and reduce potential opportunities for the spread of Covid-19. (See area for improvement 1)

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

The risk of spreading Covid-19 was minimised as outdoor play and learning was a large part of children's day. Children's physical and mental health, and opportunities to develop a life-long appreciation of the natural world were enhanced through outdoor experiences. The provider had invested in building a lodge in the wild woods area to allow children to spend more time outdoors during the pandemic.

Precautions were taken to prevent spread of infection: following government guidance, for example smaller group sizes and well-ventilated playrooms. Resources such as playdough and water were replaced on a daily basis or when groups changed. Staff were aware of social distancing requirements.

To protect staff and children from the risk of Covid-19, personal protective equipment (PPE) was readily available and used appropriately, for example, when changing children. The manager had provided every staff member with hand gel, reusable face masks and a case to store them in.

Additional handwashing routines for staff and children were carried out throughout the day. However, this practice was not consistent in line with national guidance. Older children's handwashing should be monitored to ensure that this is carried out effectively and that they understand the need for good hand hygiene. (See area for improvement 2).

There was scope for risk assessments to be progressed to clearly detail the potential hazards and the specific measures in place to reduce identified risks. For example, adding more detail about when and how hands should be washed and how this should be supervised, and the procedure for cleaning outdoor resources between changeover of cohorts. Similarly, we advised that procedures for visitors to the service should be included in the risk assessment.

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

Staff felt connected, committed to their work, which contributed to a happy and secure environment for children. They told us that they were well supported by the management team and recognised the potential impact of Covid-19 within work and personal circumstances. They told us that they felt valued and supported during this difficult time. The service had provided an additional staff area to ensure that staff could safely have a comfortable break during the pandemic.

Children were kept safe from the risk of Covid-19 because staff understood the new arrangements and their responsibilities to comply with the national guidance. One example was their commitment to carry out twice weekly lateral flow testing at home to detect the virus. This helped to reduce the possible spread of infection.

Staff had undergone inhouse training for Covid-19 and we saw that they mostly implemented this in practice, for example, social distancing and wearing masks when talking with parents. To further develop staff knowledge and skills, we advised that staff could do some online Covid-19 training, such as, infection, prevention and control and correct procedures for putting on and taking off personal protective equipment.

Systems had been introduced to evaluate staff practice in relation to national guidance, for example enhanced cleaning schedules. However, it was not clear how the use of these were monitored to ensure consistent best practice.

We suggested that the management team should develop monitoring systems to support and upskill the staff team in respect of the changes in working practice caused by the pandemic. This would ensure consistent safety precautions to support health and wellbeing at this time.

## Areas for improvement

1. To further secure the garden space the service should consider an entry system at the gate to prevent free access by the general public and unaccompanied children from leaving the premises.

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

2. Staff guidance, procedures and monitoring should be developed to improve and support a clear, consistent, and robust approach to effective handwashing. This should be in line with Covid-19 national guidance.

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