

# Ruchill Early Years Centre Day Care of Children

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Unannounced

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Glasgow City Council

**Service provider number:**  
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**Service no:**  
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## About the service

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Ruchill Early Years Centre is provided by Glasgow City Council. It is registered to provide early learning and childcare to a maximum of 56 children aged birth to five years old throughout the year.

- 9 aged under 2 years
- 47 from 2 years to not yet attending Primary School of which a maximum of 17 children aged 2 to 3 years at any one time.

The service operates from a converted building within the Ruchill area of Glasgow. Children are cared for in three different playrooms dependent on their age groups. An outdoor play area offers children opportunities for fresh air, active play and learning.

The service aims include the following information: "We aim to provide a happy, fun, welcoming environment that is safe and stimulating for children, families and staff. We have mutual trust and respect for one another, where diversity is celebrated. We will provide opportunities within the curriculum that promote skills for life on our journey to excellence."

A full copy of the aims and objectives can be obtained from the service.

The Care Inspectorate is committed to improving the health and wellbeing of all children receiving a care service to ensure that they have the best start in life, are ready to succeed and live longer, healthier lives. The Care Inspectorate has an important role to play in supporting this approach by inspecting care services for children.

We are testing our new ELC quality framework for daycare of children, childminding and school aged childcare. This inspection was included as part of the test. We have evaluated the service based on key questions and quality indicators linked to the framework. As this was a test, we will not be publishing the evaluations. More information about the quality framework and methodology can be found on our website [www.careinspectorate.com](http://www.careinspectorate.com).

## What people told us

Children told us:

"At lunchtime I am choosing toast and beans for lunch."

"I love to play outside jumping in the big tyres."

In the garden, "Did you see how fast I can run, I am a big boy."

After lunch, "My mummy is working, she will be coming soon and then we go shopping."

Through looking at the planning and consultation documents we were able to read a number of positive comments that children and parents made. This meant children were involved in developing their own learning, parents being actively consulted and staff use these comments to inform practice.

One parent sent an email stating:

"Ruchill Early Years has been amazing with not only my little girl, but our whole family. Settling in was difficult as my daughter wouldn't settle, and being born just before the pandemic this was a completely new experience for her. The staff provided reassurance and my daughter gradually built up strong bonds with her teachers. She now runs in to nursery & I am pleased there is no more tears, just excitement! The care, dedication from staff and learning opportunities are excellent. My daughter is treated as an individual and is now thriving - Thank you."

## How good is our care and learning?

### 1.1: Nurturing care and support.

Children experienced care which was nurturing and personally responsive to their needs. Staff were kind and caring in their approach and offered children comfort and cuddles in a sensitive and respectful manner. Staff engaged with children at their level and skilfully supported them to solve problems, make choices and have fun during their time at the nursery. A member of staff spoke about developing her role to be the nursery champion "Five to Thrive" protection and nurture programme. This meant that parents and staff could identify children who would benefit from focussed nurture time.

Staff were knowledgeable about children's individual needs and effectively shared information with each other to promote consistency and continuity of care. We saw that additional information was recorded in some children's personal plans who may face challenges. This ensured a holistic view of children's needs were captured including when children are supported by other agencies. This enabled all staff to have a clear record of children's changing and evolving needs to support children to consistently achieve their potential. Children's e-learning journals were meaningful; and we could track children's progress easily. We saw that children had a voice, this empowered them to direct their own learning journey.

The lunch time was observed to be a relaxed, sociable experience for children which promoted discussion about eating safely and making healthy choices. Staff sat with children and provided effective support to enable children to have a relaxed sociable experience. The children enjoyed a healthy, homemade and well presented lunch.

### 1.2: Children are safe and protected.

The staff team were knowledgeable of the child protection procedures. They had recently participated in a child protection training session. They demonstrated a sound knowledge of keeping children safe and protected. They knew who the child protection coordinator was. This ensured children were safe and protected.

### 1.3: Play and learning.

Children were well supported to learn and develop through their play and learning. Children were offered exciting, stimulating and interesting experiences which promoted curiosity, imagination and collaborative play. For example, we saw children outdoors having fun, smiling, and laughing as they played a game of turn taking and choosing friends to join in. A member of staff supported them and celebrated their achievements.

Experiences were effectively and skilfully supported by staff to promote the children's emotional resilience and risk taking skills. All children presented as happy, confident individuals who were making progress in their learning and development.

Children were leaders in their own play and learning. They were encouraged to make choices and be independent. Staff responded to their interests in a meaningful and engaging way. We observed staff using effective questioning to scaffold and extend children's thinking and learning. We saw children shaping and designing their own play, this led to imaginative play and problem solving. The babies were supported to develop their next development milestone. For example, supported to become mobile in their playroom and given time and space to investigate and enjoy curiosity led play.

We were satisfied that the service had appropriate infection control procedures in place to support a safe environment for children and staff. We saw strict handwashing routines for both staff and children and well ventilated areas.

## Areas for improvement

### How good is our setting?

#### 2.2: Children experience high quality facilities

Playrooms were positive welcoming spaces, where children could relax, play and learn. The décor was natural and furnishings such as, couches and enclosed areas provided cosy spaces. This contributed to a calm environment where children felt safe and secure.

Children were able to freely access outdoors. The use of large loose parts provided opportunities for supporting children's creative, physical and emotional resilience. Children were delighted when they asked to play games. The staff members joined in and were able to facilitate ring games in the safe and secure space.

Children made choices about what they wanted to play with. Toys and materials were very well organised and stored within their reach, making them easily accessible. When a group of children decided to play a counting game, a member of staff supported this, gaining the materials needed to enhance their play experiences.

The environment provided lots of opportunities for sensory play. Water, wooden and metal items helped children learn through exploration, curiosity, problem solving and creativity. Learning through the senses helps children make sense of their world.

Children were protected from harm through a variety of safety measures. These included: secure entry systems, safe storage of hazardous materials, and very good supervision.

The premises and garden were well maintained. Regular safety checks ensured that damaged items were replaced and broken equipment reported. This helped to keep children safe. The manager told us of her exciting plans for further resources for the garden area, this will enable children to plant and grow for example flowers, vegetables and herbs.

## How good is our leadership?

### 3.1: Quality assurance and improvement are led well.

The management team promoted a clear vision for the setting. This ensured staff were a united team who worked together on common goals. They valued their work and had a shared vision for high quality early learning and childcare.

Self-evaluation contributed to the delivery of high quality care. Staff met regularly to reflect on practice and agree changes that improved outcomes for children. For example, they were consulted and spoke knowledgeably about the priorities in the school improvement plan. They spoke highly of the management team and told us they were visible in the playrooms and had an open door policy, if they needed to discuss anything with them.

The service made use of the 'plan, do study, act' model to implement change at the setting. This strategy allows for careful planning and reflection about what works best to meet children's needs. An example of when this worked particularly well, was when the nursery consulted with children about their environment and developed a larger house corner following their suggestions.

Children benefited from a culture of continuous improvement. Monitoring of the environment, care, learning and development ensured children received very good care.

Staff were facilitated to carry out their roles. They received regular feedback on their practice and participated in formal performance reviews with their manager. Staff told us this was a supportive process that helped them achieve their development goals and improve the care they provided to children.

Staff at all levels were given an opportunity to lead projects. For example, developing numeracy nurture and leading on eco awareness in line the "COP 26 Glasgow conference." This built on their skills, boosting their morale and commitment to delivering positive experiences for children.

The management team role modelled staff, they coached and monitored them. They provided childcare suggestions and feedback that challenged staff to further develop their practice.

## How good is our staff team?

### 4.1: Staff skills, knowledge, and values.

Staff worked well together. They were positive, happy to be at work and highly motivated. This contributed to a warm, welcoming environment for children. They demonstrated a caring and nurturing approach to families and each other.

Staff had a very good understanding of child development. This helped them to assess and respond to each child's needs. This was reflected well in children's personal plans and learning journals.

Children experienced high quality care because staff were skilled, competent and able to reflect on their practice.

They participated in training and evaluated against best practice guidance to improve outcomes for children. They used higher order thinking skills when questioning children, this meant each child's experience was maximised to their own learning potential.

Team meetings provided opportunities for discussions about children's needs. Strategies to support children were agreed together ensuring consistent care that helped children achieve.

The manager participated in wider professional discussions that informed practice. For example, linking with colleagues at a virtual forum. This helped to keep abreast of best practice guidance and discussion.

#### **4.3: Staff deployment.**

Management knew staff well and valued their skills and interests. To ensure children are cared for by skilled staff, management use methods such as appraisal to match the skill set of the staff with the needs of the children.

Staffing levels supported delivery of very good care. A full complement of staff meant that children received one-to-one care when needed. This was particularly useful for helping new children settle into nursery.

Staff were well deployed to ensure very good supervision of children. They communicated with each other when a task took them away from their responsibilities, ensuring children were safe.

They had developed a staff "WhatsApp" group, this meant they could support and share best practice outwith the setting. Staff told us this was used to share the most up-to-date Covid 19 guidance and best practice knowledge. They had used technology to meet during lockdown and kept in touch with families through this platform. This ensured when they all returned it would enable a smooth transition. The manager's role modelled practice and provided, suggestions and feedback that challenged staff to develop their practice.

## **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**

Each child should have a personal plan in place to ensure staff have the right information to meet the needs of children. These should be reviewed a minimum of six monthly or more often when required. Health and Social Care Standards 1.15 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.

**This area for improvement was made on 19 April 2019.**

#### **Action taken since then**

We observed personal care plans were robust and contained required content.

**Previous area for improvement 2**

The service should ensure they have clear policies and procedures in relation to child protection. It should also be clearly displayed who the child protection coordinator for the service is. Health and Social Care Standards 3.20 I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

**This area for improvement was made on 19 April 2021.**

**Action taken since then**

The child protection policy contained the required content. The staff team demonstrated a sound knowledge of keeping children safe and protected.

**Previous area for improvement 3**

The service should review the procedures for the storage and administration of medication to ensure they follow best practice. Health and Social Care Standards 1.24 Any treatment or intervention that I experience is safe and effective.

**This area for improvement was made on 19 April 2019.**

**Action taken since then**

All medication was stored and administered safely.

**Previous area for improvement 4**

The outdoor area had a range of exciting and challenging resources for children to play and explore. Children should have the opportunity to play outside every day. Staff should monitor children's access to the outdoor area. Health and Social Care Standards 1.32 As a child, I play outdoors every day and regularly explore a natural environment.

**This area for improvement was made on 19 April 2019.**

**Action taken since then**

As mentioned earlier all children played outdoors with large loose parts play.

**Previous area for improvement 5**

The provider should ensure the service has adequate heating across all areas of the service including changing areas. They should monitor temperatures across the building. Health and Social Care Standards 5.19 My environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes.

**This area for improvement was made on 19 April 2021.**

**Action taken since then**

The building had been refurbished, it is warm, bright and well ventilated.

**Previous area for improvement 6**

To improve outcomes for children and families, the service should ensure they develop clear systems for quality assurance and monitoring and evaluating the service. This should include all aspects of the service.

Health and Social Care Standards 4.19 I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

**This area for improvement was made on 19 April 2019.**

## Action taken since then

The service uses: How Good is our early learning and Childcare and Realising the Ambition: Being Me to create a clear system of monitoring and self evaluation which focuses on improving outcomes for children.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

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