

# Drumlithie After School Help (D.A.S.H) Day Care of Children

Glenbervie Primary School  
School Road  
Drumlithie  
Stonehaven  
AB39 3YS

Telephone: 07718 295 689

**Type of inspection:**  
Unannounced

**Completed on:**  
1 April 2022

**Service provided by:**  
Drumlithie After School Help Ltd

**Service provider number:**  
SP2009010511

**Service no:**  
CS2009230714

## About the service

This service is provided by Drumlithie After School Help Ltd. It has been registered to provide a day care of children service to a maximum of 24 school age children. The service operates from Glenbervie Primary school in the village of Drumlithie. It is close to local amenities including a shop and park.

This was an unannounced inspection which took place 28 March 2022 between 14:30 and 18:00 and 29 March between 15:00 and 18:00. One inspector carried out the inspection. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- undertook focused site visits to the service to observe practice and speak to staff
- used telephone calls, Teams and emails to engage with parents, the manager, staff and the provider
- assessed relevant documents including personal plans, improvement plans, staff records, policies and risk assessments.

## What people told us

We heard from three parents who indicated that they were very happy with the overall care and support their child receives. Parents felt that staff knew their children well and their children were relaxed and comfortable with the staff.

There was a friendly atmosphere in the club and as a result children were relaxed in their surroundings. Children told us they enjoyed coming to the club to play with their friends and that the staff were nice.

## Self assessment

The service had not been asked to complete a self-assessment in advance of this inspection. We asked to look through the service's improvement plan for this year, however, there was no plan in place.

## From this inspection we graded this service as:

|                                      |              |
|--------------------------------------|--------------|
| Quality of care and support          | 2 - Weak     |
| Quality of environment               | 3 - Adequate |
| Quality of staffing                  | 3 - Adequate |
| Quality of management and leadership | 2 - Weak     |

## Quality of care and support

### Findings from the inspection

Children were relaxed throughout our visit. They confidently approached staff, which demonstrated they felt safe and secure. Staff interacted well with the children during play experiences and were mostly responsive to their needs. We identified areas for improvement in respect of supporting challenging behaviour. We suggested all staff be involved in a review of the behaviour policy to support a consistent approach.

Personal plans were in place for children who attended the club, however, information recorded was basic. Not all plans were fully completed, or reviewed where and when required. For children requiring any additional support, there were no care plans in place to identify children's individual needs, triggers and strategies in place to support them. As a result, some staff lacked knowledge and confidence in how to support children's needs. Personal plans should include detailed information relating to health and wellbeing and any additional support needs. This would ensure staff had all current information to fully meet children's needs. All recorded information should be reviewed every 6 months, or sooner whenever a change has been identified, to reflect children's most current needs. **(See Requirement 1.)**

Some improvements had been made to medication administration forms since the previous inspection. We found that there was still not enough detail included to support children who required medication. We identified children who required emergency medication, however, there were no medication consent forms in place for this medication to be administered. It was discussed with the manager that consent forms must be in place to allow staff to administer the medication. We also discussed staff access to medication and to ensure this was easily accessible to staff at all times but safely out of children's reach. We also advised that medication should be stored correctly, with information to indicate signs and symptoms, triggers and actions to take and emergency protocols. It is best practice to review all information relating to medication every 3 months. However, we found that plans had not been reviewed with parents since last year. Not all staff had accessed children's medication forms and as a result were unsure at what point children would require emergency medication.

**(See Requirement 2).**

All staff had completed basic child protection training to support them to keep children safe. However, not all staff were aware of where concerns should be recorded. The manager and staff should make themselves familiar with chronology guidance to support this. The child protection policy should be reviewed and updated in line with current guidance and should also refer to the protocol, which should be specific to the club. This would support staff to have a greater understanding of recording of concerns to support children's safety.

**(See Recommendation 1).**

Children sat at tables in the gym hall and ate their own snacks from home. Some staff were quite task oriented during snack and interaction with the children was very limited. We suggested staff should sit with the children to support snack time to be a valuable social experience for children and staff.

The gym hall was ventilated during our visit. Children's hand washing was taking place at appropriate times to support them to keep healthy and staff used hand sanitiser when entering the gym hall from outside. However, a staff member did not follow infection prevention and control measures during first aid treatments, as they failed to wash hands or wear gloves and an apron. **(See Recommendation 2).**

## Requirements

### Number of requirements: 2

1. To ensure each child's needs are fully met, the provider must ensure that:

- a) each child has a detailed personal plan in place that reflects their current needs and wishes and how they will be effectively supported
- b) all staff have an appropriate understanding of each child's current needs and use this knowledge to fully meet their needs
- c) personal plans are reviewed at least every six months with parents.

This must be achieved by 27 June 2022.

**This is to comply with Regulation 5 (1) (2) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).**

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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. To ensure the health and wellbeing of all children the provider must ensure, at a minimum, that:

- a) medication consent forms are in place for every child who requires medication
- b) emergency plans and protocols are in place for every child who requires long term emergency medication
- c) these plans and consent forms must be reviewed and updated with parents at least every three months
- d) the medication policy is updated to reflect these changes in practice and to ensure it is in line with current guidance.

This must be achieved by 27 June 2022.

**This is to comply with Regulation 4 (1) (a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).**

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that,**

**"Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)**

## Recommendations

### Number of recommendations: 2

1. To safeguard children and keep them safe from harm or abuse, the provider must ensure that:

- a) the child protection policy is reviewed and updated to ensure it is current and reflects best practice guidance
- b) the child protection protocol is specific to the club and includes clear procedures for staff to follow

c) staff should make themselves familiar with chronology guidance.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that,**

**"I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities." (HSCS 3.20)**

2. To maintain the health and wellbeing of children and staff, the provider must minimise the risk of spread of infection by ensuring, at a minimum, that:

a) staff wear the appropriate PPE during first aid treatments

b) infection prevention and control policies and risk assessments are reviewed regularly and shared with staff to ensure consistent and safe practice is embedded within the service.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that,**

**"I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)**

**Grade: 2 - weak**

## Quality of environment

### Findings from the inspection

The club was based in the gym hall of the school and there was ample room for children to move around or take part in activities. The environment was clean and tidy to minimise the risk of spread of infection.

Children could choose whether to play indoors or outdoors and asked staff to open the door to outdoors. This consisted of a hard core surface playground area. There were a number of loose parts and open ended resources to support challenge, problem solving and support the extension of children's play and interests. Staff and parents also shared that children regularly used the nearby park to support them to be active.

Staff created a plan of activities for the week, however, children told us they had little input into this. Resources were set out for children for their arrival in the club. Resources were of a good quality and included construction, games, arts and crafts and a Wii. The art and craft table was well accessed by the children. Some older children shared that they read a book, as there was sometimes little for them to do. Children would benefit from staff developing the resources to provide a richer environment and to provide more depth to play experiences.

**(See Recommendation 1).**

There was no quiet, nurturing space for children to take part in quiet activities or to rest after their day at school. This could help support some children who may need help with regulating their emotions or for the older children who want some quiet time.

The club had access to one display board where we could see some involvement from the children, including

drawings and craft activities. However, children had limited opportunities or spaces to showcase their learning and play experiences. We suggest child led floor books. This would support children to feel involved and included in their club. There was a noticeboard outside to display parents' information. There was minimal information here and some notices were out of date. As a result, parents shared they would like more communication from the service. We suggested the display board should be updated to include more information, to support parents to feel included and have the most up to date information.

Risk assessments were in place for activities indoors and outdoors and for specific outings, however, these were very basic. Risk Assessments should be reviewed to ensure they all include the level of risk, all possible risks and how these risks will be managed.

**(See Recommendation 2).**

Accidents and incidents were recorded by staff and a written copy was given to parents, who signed the form to show that they had read the information. An overview sheet supported the manager to identify any patterns or triggers, helping to keep children safe.

## Requirements

**Number of requirements: 0**

## Recommendations

**Number of recommendations: 2**

1. To support children to lead and extend their play through a wide range of quality experiences, the provider should, at a minimum:

- a) ensure that resources are reviewed and updated to offer more choice, challenge, and creativity
- b) ensure that children can access a wide range of experiences and resources suitable for their age and stage which support them to develop their imaginations and problem-solving.

**This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that,**

**"As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity." (HSCS 2.27)**

2. To ensure the safety and wellbeing of the children, the provider should ensure that all risk assessments are reviewed and developed to include the level of risk, current measures in place to reduce risk and any further actions required.

**This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that,**

**"My environment is secure and safe." (HSCS 5.17)**

**Grade: 3 - adequate**

## Quality of staffing

### Findings from the inspection

Staff interacted well with the children during play experiences. Staff were responsive to children and comforted them when upset. They were knowledgeable about the children and mostly had a good understanding of their needs and how to meet these.

Two new staff had recently been recruited. Safer recruitment practices were consistent within each recruitment file. Newer staff shared with us that they had completed an induction when they started with the club. These were basic checklists. There was no record of staff understanding of what was covered at inductions. Specific areas, such as child protection, policies and procedures, children's personal plans, policies and procedures, medication, child protection should be a priority in staff induction. We suggested the induction checklist should also be signed and dated, which would provide a clear overview to ensure all newly recruited staff have the appropriate training and skills required prior to completing tasks. **(See Recommendation 1).**

Staff had attended core training in child protection and first aid. An overview of staff training was in place, however, training accessed was not dated to support the manager to recognise when training was due to be refreshed. A training plan should be put in place for the next year to show targeted training for each member of staff. The plan should then be updated to show when training has been completed. Staff should evaluate their training to show any impact on their practice or professional development to support positive outcomes for children.

Staff had little knowledge of best practice documents. Staff should be supported to develop their knowledge of best practice documents, to support ongoing improvement within the club. **(See Recommendation 2).**

Regular staff meetings had taken place, which provided the opportunity to share information. It would be beneficial for the staff team to be empowered to be more involved in these meetings, for example, developing agendas. This could offer the opportunity for reflection on practice, discussing children's experiences, sharing individual children's needs, and reviewing paperwork.

### Requirements

**Number of requirements:** 0

### Recommendations

**Number of recommendations:** 2

1. To support staff to have the skills and knowledge to support children to be safe, the provider should implement a robust induction process, which would provide a clear overview to ensure all newly recruited staff have the appropriate training and skills required prior to completing tasks.

**This ensures 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)

2. To support the staff team's professional development and improve play experiences and outcomes for children, the provider should implement a targeted training plan which includes current best practice documents and supports staff to evaluate the impact of their training.

This ensures 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)

**Grade:** 3 - adequate

## Quality of management and leadership

### Findings from the inspection

A previous requirement to introduce quality assurance systems to assess the quality of the service had not been fully addressed yet. As a result, there was no improvement plan in place to provide clear direction for the manager and staff. The provider should work with the manager, parents, children and staff to embed a strong culture of self-evaluation in the service. This should inform the development of a robust improvement plan, to help support improvements to the service. **(See Requirement 1).**

Policies and procedures to support a well run service had not always been reviewed to clearly show up to date best practice and legislation. As a result staff were not following best practice regarding personal plans and medication. All policies should be reviewed and updated to meet current guidance and best practice, including medication and child protection. **(See Recommendation 1).**

The provider should support the manager to take on supervision and monitoring of the staff team and share feedback with them, to highlight and praise good practice and discuss areas for development. This would support consistent practice, ongoing professional development and improvements within the service. This information should be used to support more in depth appraisals, during which staff can discuss their wellbeing, development, training needs and any other future development. These should be reviewed throughout the year to support any ongoing staff needs. **(See Recommendation 2).**

### Requirements

#### Number of requirements: 1

1. To ensure children and families receive a high-quality service, the provider must implement effective quality assurance processes, including an improvement plan, to support ongoing improvement.

This must be achieved by 11 July 2022.



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

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that,

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

## Recommendations

**Number of recommendations: 2**

1. To ensure safe and consistent practice within the service, the provider should review and update all policies and procedures, to ensure they are current in relation to best practice guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that,

"I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

2. To support positive outcomes for children the provider should, at a minimum:

- a) implement supervision and monitoring of staff to support consistent practice, ongoing professional development and improvements within the service
- b) support staff with robust and regular appraisals to support their ongoing development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that

'I benefit from a culture of continuous improvement with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

**Grade: 2 - weak**

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

## Previous requirements

### Requirement 1

1. In order to ensure each child receives appropriate care and support and their needs are met the provider must by 1 May 2020:

a. Develop and implement personal plans for children. The plans must reflect children's current needs and provide clear guidance to staff on how they will meet each child's needs.

b. Ensure children's information and personal plans are developed and reviewed in consultation with parents/carers and other professionals where appropriate, to ensure they are effective and are meeting children's needs.

This is to ensure that 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). 'My needs as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23)

This is to comply with Regulation 5 (Personal Plans) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

**This requirement was made on 24 February 2020.**

## Action taken on previous requirement

There had been little improvement to personal plans and information recorded was basic. Plans were still not fully completed, or reviewed where and when required.

**Not met**

## Requirement 2

To ensure that staff have the knowledge and skills to keep children safe and healthy the provider must by 1 May 2020:

a. implement a training plan which meets individual training needs and which ensures that staff have the knowledge and understanding to effectively carry out their role.

b. ensure that training impacts positively on the staffs practice and improves outcomes for children.

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

'I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their organisational codes' (HSCS 3.14)

This is to comply with Regulation 15 (Staffing) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

**This requirement was made on 24 February 2020.**

## Action taken on previous requirement

An overview of training was now in place, however, training accessed was not dated to support the manager to recognise when training was due to be refreshed. No training plan was in place to identify any targeted

training for each member of staff.

**Not met**

### Requirement 3

To ensure that outcomes for children improve the provider must by 1 June 2020:

- a. implement robust monitoring and evaluation of the service.
- b. implement a detailed improvement plan developed following consultation with children, parents and staff. The improvement plan should address all issues identified and set clear targets which will improve outcomes for children.

This is to ensure that 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)

This is to comply with Regulation 3 (Principles) and 4 (Welfare of users) of the Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

**This requirement was made on 24 February 2020.**

### Action taken on previous requirement

This requirement to introduce quality assurance systems to assess the quality of the service had not been addressed yet. There was no improvement plan in place to provide clear direction for the manager and staff.

**Not met**

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

### Previous recommendations

#### Recommendation 1

In order to support children to make positive healthy eating choices, learn self-help skills and develop independence and responsibility, the manager and staff should review the snack and lunch routines, improve the nutritional value of snack menu options and ensure that children have access to drinks at all times.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that,

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning' (HSCS 1.33).

**This recommendation was made on 20 February 2020.**

#### Action taken on previous recommendation

Families now provided all snacks and children could access water during snack.

This recommendation has been met.

## 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).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

| Date        | Type        | Gradings   |
|-------------|-------------|--|
| 24 Feb 2020 | Unannounced | Care and support 3 - Adequate<br>Environment 4 - Good<br>Staffing 3 - Adequate<br>Management and leadership 3 - Adequate |
| 1 Aug 2018  | Unannounced | Care and support 4 - Good<br>Environment 4 - Good<br>Staffing 3 - Adequate<br>Management and leadership 3 - Adequate     |
| 31 Aug 2017 | Unannounced | Care and support 4 - Good<br>Environment 4 - Good<br>Staffing 2 - Weak   |

| Date        | Type        | Gradings                  |               |
|-------------|-------------|---------------------------|---------------|
|             |             | Management and leadership | 2 - Weak      |
| 23 Nov 2016 | Unannounced | Care and support          | 3 - Adequate  |
|             |             | Environment               | 4 - Good      |
|             |             | Staffing                  | 2 - Weak      |
|             |             | Management and leadership | 2 - Weak      |
| 28 Oct 2013 | Unannounced | Care and support          | 5 - Very good |
|             |             | Environment               | 5 - Very good |
|             |             | Staffing                  | 5 - Very good |
|             |             | Management and leadership | 5 - Very good |
| 5 Nov 2010  | Unannounced | Care and support          | 5 - Very good |
|             |             | Environment               | 4 - Good      |
|             |             | Staffing                  | 5 - Very good |
|             |             | Management and leadership | 5 - Very good |

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

0345 600 9527

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