

Peek-a-boo Nursery School Day Care of Children

12 Parkgrove Loan
Edinburgh
EH4 7QX

Telephone: 01313 399 161

Type of inspection:
Unannounced

Completed on:
14 July 2022

Service provided by:
Peek-a-boo Nursery (Edinburgh)
Limited

Service provider number:
SP2003002967

Service no:
CS2003012072

About the service

Peek-a-boo Nursery School is registered to provide an early learning and childcare service to 84 children from six weeks - five years of whom a maximum of 20 may be under two years old. The service operates between 08:00 to 18:00 Monday - Friday.

The service is located in the urban Parkgrove area of Edinburgh, near Queensferry Road. The children have access to playrooms, a dining room (the kitchen) and a sleep room. Each playroom has direct access to an outdoor area. The service is next to local transport routes and near shops and schools.

About the inspection

This was an unannounced inspection which took place on 13, 14, 15 June 2022 and 7 July 2022. Two inspectors carried out the inspection. The inspection was brought forward due to concerns about the health, welfare and safety of children. We worked with police and the local authority to ensure the safety and wellbeing of children while investigations were carried out and concluded. We have been working closely with the service throughout this process to ensure children were kept safe.

To prepare for the inspection we reviewed information about this 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 evaluations we:

- spoke with children and gathered feedback from families using the service
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Feedback was given on 14 July 2022 to two senior managers of CCN (the provider).

Key messages

Immediate action is needed to improve experiences and outcomes for children.

Children are at risk because staff do not feel confident to report concerns and there is a culture of mistrust at management level.

Whistleblowing procedures had not been followed when allegations were made.

Staff's knowledge and understanding is variable which means the quality of care is inconsistent.

Children's health and wellbeing is at risk because information from parents is not followed consistently.

We have concerns about children's safety within the environment. The environment requires attention to ensure children are kept safe and to secure children's progress and development.

Quality assurance systems are not robust or effective and, at present, have little impact on the quality of the service for children and families.

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, play and learning?	1 - Unsatisfactory
How good is our setting?	1 - Unsatisfactory
How good is our leadership?	1 - Unsatisfactory
How good is our staff team?	1 - Unsatisfactory

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we assessed this quality theme as unsatisfactory.

QI 1:1 - Nurturing care and support

Children's safety, emotional security and wellbeing were compromised by poor sleep arrangements. Staff did not regularly monitor individual children as they slept and staff deployment arrangements for this busy time was ineffective in ensuring staff fully met children's needs. Following a serious concern raised with the service, a new system for monitoring sleeping children was introduced in the baby room. This included better recording of who put children to bed and cared for them while they slept. However, this was new to staff and had not yet been embedded in practice. This had also not been shared across all age groups as promptly as expected to keep children safe. The service must develop their sleep routines to ensure that all children experience a calm, nurturing sleep routine that supports their individual needs and contributes to their emotional wellbeing (see requirement 1).

Children's health and wellbeing was put at risk because information from parents was not followed consistently. For instance, some children had received foods they were intolerant or allergic to on more than one occasion. This could result in a child having a severe reaction, putting their health and safety at risk. The service must ensure that personal plans are updated on a regular basis in partnership with parents and staff must be vigilant in following them. This will contribute to children receiving the right care at the right time which meets their individual needs and keeps them safe (see requirement 2).

We had significant concerns around the storage, recording and monitoring of medication. We highlighted these on the first day of our inspection. Staff were unable to confidently tell us who had medication, where it was stored and in what circumstances children should receive it. This could result in children's individual medical needs not being met in an emergency. The service should review their storage, recording and monitoring of medication to ensure that all information held is correct and up to date. Staff should be informed and knowledgeable about children's medical needs and be able to respond to these as required (see requirement 3).

Parents were unclear about the procedures followed and if their child had received first aid for accidents, resulting in a lack of confidence. Similarly, the service had failed to follow the correct reporting procedures for accidents and incidents. For example, there had been several accidents where children sustained a head injury which required medical attention and incidents such as children eating foods they were allergic to. These are notifications that should have been submitted to the Care Inspectorate and parents should have received swift and precise information about the circumstances. The service must review their accident and incident recording procedures (see requirement 4).

Staff at all levels lacked understanding of their roles and responsibilities in relation to keeping children safe and protected. The service had not sufficiently developed and implemented effective child protection policies and procedures. As a result, staff did not have enough general knowledge or clear policies to aid them. Similarly, staff had a limited understanding of their roles and responsibilities in relation to children's rights and reporting poor practice. This had the potential to compromise children's welfare and safety which cannot be tolerated. Staff must be expected and supported to develop their safeguarding and child protection knowledge to keep children safe and protect them from harm (see requirement 5).

QI 1.3 - Play and learning

We found the pre-school room to be busy and chaotic throughout the day. We observed practices over lunchtime and the afternoon session where children were not free to make choices and were contained as staff carried out lunchtime routines. This resulted in children becoming disengaged and bored as staff focused on tasks.

Staff were unaware of their critical role in planning for and supporting children's current interests, learning and development. Evidence gathered showed that planning approaches were not child centred or responsive to children's interests. For example, staff in rooms were carrying out three monthly or sessional forward planning. As a result, children were not experiencing appropriate opportunities to support and consolidate their own individual learning through play. One parent told us, "They have a group plan, I wouldn't say it's too personal and can sometimes feel a bit generic". The service should develop a planning cycle that plans appropriately to meet the individual needs of babies, toddlers and young children across all areas of their play and learning. Staff should use creative and innovative ways to involve children in planning. This will support children to progress well and contribute to their wellbeing and happiness (see requirement 6).

We were unable to evidence how children's experiences were individualised and sufficiently challenging. E-Journals were in place, however, we found that high-quality observations were not being logged to capture and extend children's learning and show progression. One parent told us, "We have not had any recent observations on the E-Journals so feel that we are unsure of how our child is developing or what experiences they have been doing". Where children required more support, initial plans were created but were not effectively put into action. All staff should revisit their knowledge and understanding of child development theory and practice. Management should support staff to develop their observations skills to ensure that high quality observations are being used effectively to promote all areas of children's development, learning and wellbeing. As a result, children will be supported to reach their potential (see requirement 6).

Requirements

1. By 1 August 2022, the provider must ensure that children are kept safe while they are sleeping. To do this, the provider must, at a minimum:
 - a) ensure sleeping children are monitored and checked at regular intervals. Including checking their comfort, breathing and position while sleeping.
 - b) record sufficient information about children's sleep times including the time they enter and leave the sleep room and the times they are monitored and by which staff.
 - b) ensure that staff are well-informed and can implement the sleep policy and risk assessments outlining the procedures that they must follow.
 - c) ensure that the safe sleeping practices are regularly quality assured by the management team.
 - d) review the suitability of equipment (including noise machines and lighting) and the safety of the sleep room by enhancing lines of sight into the room.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 Health and Social Care Standards (HSCS) which state that: 'My care and support meet my needs and is right for me' (HSCS 1.19).

2. By 1 August 2022, the provider must ensure that children's health, welfare and safety needs are met. The provider must ensure that care needs set out in children's personal plans are followed accurately by staff. This will help keep children safe and meet their health and wellbeing needs.

To do this, the provider must, at a minimum:

- a) ensure staff have accurate information on each child's needs
- b) ensure staff meet those needs by using information and instructions from parents
- c) ensure planned review dates are carried out at least once every six months in consultation with parents or sooner if a child's support needs change.

This is to comply with Regulation 4(1)(a) (Welfare of users) and 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 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).

3. By 1 August 2022 the provider must ensure that children's medical needs are met to keep them safe and healthy. To do this, the provider must, at a minimum:

- a) ensure that written information relating to children's medication is recorded with clear instructions and permission given by parents
- b) instructions on the actions staff should take to support a child if they became unwell while in the care of staff.
- c) clear procedures to sign medication in and out of the service
- d) safe storage of medication
- e) ensure staff are knowledgeable about children's medical needs and where medication is stored

This is in order to comply with Regulation 4 (1)(a) (Welfare of users) of The Social Care and Social work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI/2011/210).

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

4. By 26 August 2022, to ensure children's health and wellbeing there must be a full review of accidents, incidents, communication with parents and notifications to Care Inspectorate. This will help to ensure that children and parents experience a safe service.

To do this, the provider must, at a minimum:

- a) ensure staff understand the procedure to be followed in the event of an accident.
- b) maintain accurate documentation of all circumstances prior, during and after the event.
- c) ensure parents are fully informed of accidents and incidents and, if needed, advised to seek medical support.
- d) adhere to the notifications services must submit to the Care Inspectorate guidance.
- d) implement an audit system for accidents and incidents and use information to further reduce any risks identified.

This is to comply with Regulation 15 (a)(b)(i) 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 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).

5. By 8 August 2022 , the provider must ensure children are safe and protected from harm.

To do this the provider must, at a minimum:

- a) provide instruction to staff to ensure they are confident and understand how to respond to and report any concerns about a child's safety and welfare.
- b) ensure staff are fully aware of the services' internal and national child protection guidelines and can implement these with confidence when needed.
- c) develop a training plan to ensure all staff can continue to implement child protection procedures through a planned approach to regularly update their training and knowledge.
- d) ensure staff understand their duty to protect children within their professional SSSC codes of practice.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

6. By 21 October 2022 , the provider must improve how staff interact with and support children's play, learning and development. This must include, at a minimum:

- a) enhancing staff skills and knowledge in how young children learn
- b) supporting staff to implement a child-centred approach to observation, planning and assessment of children's learning through play
- c) reviewing how parents and children are included and partners in planning and how they are informed and communicated with about children's development and progress
- d) when children require more tailored support, this is planned and reviewed with parents and professionals to monitor outcomes and the success of approaches used.

This will ensure children get the right support at the right time.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 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).

How good is our setting?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we assessed this quality theme as unsatisfactory.

QI 2.2 - Children experience high quality facilities

Although the indoor space for younger children was welcoming and comfortable, we had concerns about children's safety. We alerted staff to the dangers of having uncooked hard pasta and spaghetti in the baby room where there were young babies who could choke or injure themselves. The pre-school room was also a risk at times throughout the day as resources on the floor became slip and trip hazards. This demonstrated a limited understanding of children's development and posed risks to children that would otherwise be avoided. Staff must be vigilant to the potential risks to children. Effective risk-benefit assessments should be used and understood by staff to help keep children safe. This will contribute to children experiencing a range of safe, stimulating play resources that support and challenge their learning (See requirement 1).

Although younger children experienced a homely environment, the spaces for older children appeared tired and unkept. For example, the book area was un-inviting and there were no areas where older children could relax and rest. We observed children trying to get comfortable and rest on the hard floor with a small rug and one cushion. The noise levels were intrusive and not conducive to a homely play and caring environment. The service should continue to develop their spaces to reflect children's wellbeing, comfort and current interests (see area for improvement 1).

All children had direct access to an outdoor space. Children could mostly influence when they played outside. However, at certain points in the day children's play was interrupted by daily routines as discussed earlier in Quality Indicator 1.1. Children had access to a variety of resources and experiences. For example, we observed children having fun with water play outdoors on our second visit. However, certain areas of the outdoor space were tired and in need of attention. One parent told us, "We have received little in the way of updates on planned maintenance for the building and it's evident that some repair work is necessary". These areas were blocked off to children which meant that children's outdoor experiences were potentially being limited. The service should ensure that they have a swift and efficient monitoring, maintenance and repair system in place. This will ensure that maintenance is carried out promptly and help ensure a consistently pleasant and inviting play space for children which is in a good state of repair (see requirement 2).

Policies and procedures within the setting were not clear or accessible to staff which resulted in children being exposed to potential risks. We recognised the service was in a transition period, however it is vital that all policies and procedures are kept up to date and shared with all staff and families. Policies should be clear, meaningful and tailored to the individual service. All staff must have a good understanding of the policies that underpin their practice, and be confident in following and implementing these. This will contribute to children being kept safe and experiencing consistent practice across the setting (see area for improvement 2).

Requirements

1. By 1 August 2022, the provider must ensure children experience a safe and appropriately challenging environment. To do this, the provider must, at a minimum:

- a) provide instruction and guidance to ensure staff can provide and maintain a safe environment
- b) develop a training plan to ensure staff are enabled to carry out their responsibility in identifying and reducing risks

- c) ensure that risk assessments and checks are carried out regularly with identified hazards reported and addressed promptly; including risk-benefit assessments
- d) ensure that children are appropriately challenged through play and can explore resources and equipment that are suitable for their stage of development and individual abilities.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

2. By 29 August 2022, the provider must ensure the environment is well-maintained and accessible to children. To do this, the provider must, at a minimum:

- a) undertake a review of the indoor and outdoor environments to identify any required maintenance, this will ensure children get the benefit of accessing a range of areas
- b) ensure these checks are carried out regularly to support continuous improvements to the environment and minimise risks to health and safety
- c) create a plan to carry out environmental improvements based on risk assessment
- d) ensure children, parents and staff are consulted and informed about plans.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

Areas for improvement

1. To support positive wellbeing and learning, the provider should ensure a pleasant, safe and stimulating environment for children throughout each day. The layout, resources and equipment should promote an inclusive and accessible environment for children. Staff should present resources well to make them interesting and inviting to children throughout the day. Children's right to rest and relaxation should be planned for within the environment.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

2. The provider should ensure policies and procedures are effective and result in high-quality staff practice. Staff should know and follow procedures to promote children's health, safety and wellbeing at all times. Parents should be informed of policies and procedures and know what to expect from the service provided. This will support children to thrive in the service and meet their potential.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support because people have the necessary information and resources (HSCS 4.27).

How good is our leadership?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we assessed this quality theme as unsatisfactory.

QI 3.1 - Quality assurance and improvement are led well

Change processes were not managed well, and staff were not supported to reflect on their practice in a meaningful way. This led to areas for improvement not being addressed. Leaders did not sufficiently challenge staff and themselves to raise standards. One parent shared, "Since CC group took over and the staff have left, things have not been great which is of a huge concern." Staff turnover has been significant, and this has left staff and families feeling less confident in raising concerns and feeling like concerns will not be dealt with appropriately. The provider must now ensure that the pace of change is well judged and appropriate to have a positive impact on outcomes for children and families. Management should ensure they are effective role models and guide the strategic direction and pace of change to ensure staff, children and families feel supported and included throughout this change process. As a result, children will be supported by staff that feel valued, respected and confident in their roles (See requirement 1).

Quality assurance systems were not robust or effective and, at present, had little impact on the quality of the service for children and families. The provider had recently introduced a new external quality assurance role for their Scottish services however this was not yet established or impacting on the quality of care and support to children. Staff were unclear about basic strategies and policies for example Getting it Right for Every Child (GIRFEC) and their responsibilities within that process. Families did not feel informed and included in the planning and development of the service. The service should develop a quality assurance system which includes ensuring the basic health, welfare and safety of children is met and the areas in this report are addressed as a matter of urgency. They should make good use of self-evaluation and improvement plans that lead to continuous improvement and sustained good-quality care. The service should ensure that children, families and staff are meaningfully involved and can influence positive change in the service (See requirement 2).

Requirements

1. By 12 September 2022 children and parents must experience care in a service where change is well led and managed. Parents should be respected and informed about the improvements and how these will be supported. Management should ensure they are effective role models and guide the strategic direction and pace of change to ensure staff, children and families feel supported and included throughout. As a result, children will be supported by staff that feel valued, respected and confident in their roles.

This is to comply with Regulations 4 (1)(a) (Welfare of users) and 7 (2)(c) (Fitness of manager) 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 which state that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.16).

2. By 31 October 2022, to ensure that children and parents experience a service which promotes children's health and wellbeing through high quality care, play and learning experiences, the provider must ensure that there is a culture of continuous improvement. To do this, the provider must, as a minimum:

- a) develop and implement an improvement plan for the service.
- b) ensure staff practice and children's experiences are monitored and consistent with best practice and national guidance, for example safe sleeping guidance
- c) build opportunities for professional discussion and feedback to improve staff and service performance
- d) develop systematic and rigorous procedures for quality assurance including self-evaluation, auditing and monitoring of record keeping across all aspects of the service
- e) ensure staff practice and how they support children's play is in line with best practice, for example ensuring a well-set up and safe play space with core resources
- f) ensure that staff role model good practice in all aspects of the service to promote a culture where children experience protection, love, warmth and nurturing care.

This is to comply with Regulation 15 (a)(b) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) 3, 4 (1)(a) and 15(b).

This is to ensure that care and support is consistent with 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).

How good is our staff team?

1 - Unsatisfactory

We were very concerned about aspects of the care being provided and we assessed this quality theme as unsatisfactory.

QI 4.3 - Staff deployment

Children were at risk because staff did not feel confident to report concerns and there was a culture of mistrust at management level. We found that whistleblowing procedures had not been followed when allegations were made. However, staff have a responsibility to keep children safe and we advised them of other agencies and who they could seek support from, including the Care Inspectorate. We required immediate action to ensure children's safety, this included dealing with allegations of misconduct and ensuring safe sleep for children. We have made requirements and reported on this in QI 1.1 and 2.2.

Staff interactions were mostly neutral and task-focused. For example, they missed signals from children who did not speak and did not notice when children were disengaged and bored. This meant children's individual needs were not always being met and resulted in missed learning and development opportunities. This was more apparent during the lunchtime period where the daily routines across the nursery had an impact on children's play experiences. For example, children were unable to access the outdoor space during this time. The service should review how they use the whole space creatively to support key times of the day to ensure that daily routines are managed sensitively. For instance, older children being able to access indoor and outdoor spaces whilst younger children are sleeping after lunch. As a result, children would be supported by sensitive daily routines that are flexible and recognise children's individual needs across the day (see requirement 1).

Children's care, learning and development had been compromised due to the lack of leadership across the service. The service had been through a recent staffing restructure, as a result staff had taken on new leadership roles within each room. Although roles and responsibilities had been shared with individual staff, these were being revisited to ensure they were clear. It was evident that some felt overwhelmed and were not confident in key areas of their practice or the role they were in. Where staff required support to develop their skills and knowledge, this had not been identified or addressed. The provider should ensure that they implement a clear and consistent process for mentoring staff within new roles and if needed, within their current role. This will enable staff to have access to the correct guidance, be effective and responsible in their role and support them to meet the needs of children and families (see requirement 2).

Staff's knowledge and understanding was variable which meant the quality of care was inconsistent. Staff had been on some training courses but this had not impacted on their practice. For example, staff we spoke to had completed training to support core areas of practice such as observation and planning skills. However, staff shared that they were not confident in either of these areas of childcare practice. Senior management had begun a staff skills audit and they planned to use this information to inform future staff training. However, this was in its infancy. The service should proceed with an audit and observations of staff skills, knowledge and experience and ensure that this information is used to inform staff training and professional development. The deployment and staffing levels must take account of the skills mix, knowledge and experience of individual staff. This will contribute to the safety, wellbeing and health of children to begin to support better outcomes (also see requirement 2).

The high staff turnover had impacted on the continuity of care for children and communication levels with families. The approach to staffing was not outcome-focused. Children and families were not always advised when staff were absent and were often not introduced to new or temporary members of staff. One parent told us, "We have to basically hand our child over to a complete stranger and they don't introduce themselves". Families need to be kept informed and introduced to all staff in the team who may be caring for their children. This will enable them to build positive relationships and contribute to children to experiencing continuity of care across the day (see area for improvement 1).

Requirements

1. By 29 August 2022, children must experience a well planned service based on an assessment of children's needs. In order to achieve this the provider must ensure children are cared for by staff who are trained, competent and skilled. Staff should reflect on their practice and ensure they follow the SSSC codes of practice and always uphold children's rights. This will result in children benefitting from being cared for by responsive staff who have the knowledge, experience and skills to care for and nurture them.

This is to comply with Regulation 15(a)(b) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

2.

By 16 August 2022, the provider must support children's health, welfare and safety needs by maintaining appropriate staffing levels at all times. Staff must be suitably trained, qualified and deployed effectively to secure positive outcomes for children.

To do this, the provider must, at a minimum:

- a) plan staff rotas to ensure children's needs are met, particularly at transitions times such as meals, sleep times and end of the day.
- b) be aware of, actively plan and record where staff will be deployed within the service
- c) staff deployment must take account of the mix of the skills, experiences and qualifications of the team. It must also protect and safeguard children and staff
- d) put measures in place to guarantee a responsive approach to children's care, which meets their individual support needs.

This is to comply with Regulation 15(a)(b) 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 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) and 'My needs are met by the right number of people' (HSCS 3.15).

Areas for improvement

1. The provider should ensure that families are kept informed and introduced to any new staff who may be caring for their children. This will improve communication, help parents feel more at ease with any changes and will allow relationships and trust to be built between staff, parents and children.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	1 - Unsatisfactory
1.1 Nurturing care and support	1 - Unsatisfactory
1.3 Play and learning	1 - Unsatisfactory
How good is our setting?	1 - Unsatisfactory
2.2 Children experience high quality facilities	1 - Unsatisfactory
How good is our leadership?	1 - Unsatisfactory
3.1 Quality assurance and improvement are led well	1 - Unsatisfactory
How good is our staff team?	1 - Unsatisfactory
4.3 Staff deployment	1 - Unsatisfactory

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