

Cumbernauld YMCA - Colquhoun Park OSC (POMP) Day Care of Children

Colquhoun Park Primary School Canniesburn Road Bearsden Glasgow G61 1HD

Telephone: 01236 721382

Type of inspection: Unannounced

Completed on: 8 September 2022

Service provided by: Cumbernauld YMCA-YWCA

Service no: CS2003003713 Service provider number: SP2003000977



About the service

The service is part of the Peace of Mind for Parents (POMP) childcare service, provided by Cumbernauld YMCA/YWCA.

It provides after school care for a maximum of 30 children attending primary school and up to the age of 16 years. The service is available Monday to Friday during school term time from 3pm to 6pm. The children present had various patterns of attendance over a week. They operate from the gym hall in Colquhoun Park Primary School situated in the Bearsden area of East Dunbartonshire.

About the inspection

This was an unannounced inspection which took place on 01 September 2022 with further visits on the 06 September 2022 and 07 September 2022. The inspection outcomes were shared with the service on 08 September during a video call. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with a small group of children using the service
- gathered views from three families using the service
- spoke with four staff and management
- observed practice and daily life
- reviewed documents

Key messages

- Children were engaged in the activities on offer
- Most interactions were caring and respectful
- · Children had access to a good range of resources and access to outdoor areas
- Environment needs to be risk assessed to ensure appropriate safety measures put in place
- The service needs to further enhance the systems to plan and meet children's needs
- Further development of methods to support children's voice, involvement, empowerment
- The service needs to be better managed, this includes leadership roles being disseminated, to ensure a high quality service is provided
- The service needs to agree a shared vision and develop meaningful quality assurance systems to support improvement
- The service need to improve communications with parents and carers, to ensure they know what quality of service their children are experiencing

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? | 3 - Adequate |
|--|--------------|
| How good is our setting? | 3 - Adequate |
| How good is our leadership? | 3 - Adequate |
| How good is our staff team? | 3 - Adequate |

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

How good is our care, play and learning? 3 - Adequate

We made an evaluation of adequate for this quality indicator. Where strengths had a positive impact, but just outweighed weaknesses.

1.1: Nurturing care and support

Children were engaged in play and having fun playing with their friends. Children were welcomed each day into the service by staff. Children and staff had formed positive relationships and were confident and comfortable receiving comfort and support. A few staff interactions with the children could be improved, staff tone and manner should promote nurture and respect.

Snack time was a noisy and very busy experience. All children had snacks at the same time and staff were busy serving the food. Staff did not sit with children. Children were not involved in the preparation or serving of the snacks. Children accessed their own water bottles in school bags, a jug of water was available but not within children's reach. This may result in children not having a drink during the session. Staff need to ensure they are aware of the importance of children's access to fluid and keeping hydrated. The service agreed to review the snack time to involve children more and create a more relaxed unhurried experience. We observed an improved snack time during our second visit. Meals should be an important part of the daily routine not just seen as a must do task.

The environment could be improved to provide more nurture and calm, especially for the younger children, or for children who prefer a calmer, quieter atmosphere, as a loud, busy environment could be challenging. The service should consider the needs of all children when creating play spaces.

Personal plans did not comply with national guidance and legislation, or support consistency and continuity of care routines and development. Personal plans were reviewed, but children and families had little input in this process. Parents told us 'We complete a form a few weeks in to a new session asking about wishes and choices. I do not know if this information is used to plan activities.', 'At pick up I am advised if everything has been ok. Otherwise I have no information about progress or experiences.' and 'I'm unsure as to whether they do any activities with the children unless my child tells me otherwise.' The Personal Plans gathered information about children's interest but did not reflect children's wellbeing needs or how the service planned to support these. The service was reviewing the personal plans process at the time of the inspection. To support the service in this task, we have made an area for improvement (see area for improvement one.) The service can find more information in the Guide for Providers on Personal Planning, which can be found on the Care Inspectorate Hub.

There is inconsistency or a lack of understanding regarding the management and administration of medication. There may be the potential of risk for children if they required medication. We have made an area of improvement (see area for improvement two.) The service can find more information in the Care Inspectorate Hub on administration of medication.

1.3 Play and Learning

The service was at the early stages of involving children in planning and directing their own play. Staff asked children what resources and activities they would like. Staff used children's suggestions to set up and plan daily experiences. Methods used to consult with children could be improved to support more responsive, child led play. Some children had concerns that they would miss the activities they suggested.

Children were engaged in the play and were having fun playing a range of physical activities, being outdoors and being creative with paint and pens. The children liked playing table top games. Play experiences could be further enhance by providing more challenge and opportunity to learn new skills.

Children did access the school grounds. They were not supported to access the local community, therefore the service should now consider how they can support children to become part of their own, and the wider community.

Children were freely choosing what activities they participated in and were being encouraged to share ideas and opinions. To further empower children, the approaches in place to observe, monitor and plan children's play needs to be improved. Consultations with children lack structure and challenge and miss opportunities to build on their interests.

Areas for improvement

1. To support children's wellbeing, learning and development the provider should ensure each child has a personal plan. These should include, but not be limited to;

- children's health and wellbeing needs
- how the service plans to support these
- be created in consultation with parents, staff and other professionals

This is to ensure that care is consistent with the Health and Social Care Standards which state "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) and "my care and support meets my needs and is right for me" (HSCS 1.19)

2. To support children's health and wellbeing needs, the provider should ensure that when children require medication it is done so safely. This should include, but not be limited to.

- be administered by staff that have all the necessary information about the child's medical needs
- only when consent has been given, including dosage and when to be administered
- for life saving medication an emergency plan is in place

This is to ensure that care is consistent with the Health and Social Care Standards, which state that as a child, any treatment or intervention that I experience is safe and effective. (HCSC 1.24)

How good is our setting?

3 - Adequate

We made an evaluation of adequate for this quality indicator. Where strengths had a positive impact, but just outweighed weaknesses.

2.2: Children experience high quality facilities

The service is provided from the school gym hall and children have access to the school grounds. The gym hall is spacious and children have access to a good range of resources. The service has limited opportunities to make changes to the facilities, as it is not owned by them.

We found that the main entrance to the school was secure. However, the door entry to the gym hall was open throughout the session and the outdoor play areas were not secure. The service needs to ensure that they have appropriate safety measures in place to keep children safe. For example, staff levels should be suitable to ensure children's safety. Further information to support staff practice can be found on the care inspectorate hub in the Keeping Children Safe – Look, Think, Act Campaign (see area for improvement one). One parent did tell us 'It is difficult for the service to ensure the environment is secure when outside as other people use the playground. Door entry at the main door ensures security when inside. '

The gym hall allows children to participate in a range of physical activities in all weathers. Children can access further physical play equipment outdoors and have access to a football pitch. Which children told us they enjoy. Some children told us they would like to access climbing frames, swings, seesaw and slides. The service should consider if unable to provide within setting, is there a park in local area they could access.

The children were having fun taking part in a range of play experiences. Children had a keen interest in art. The service could consider how they could further support this by providing more challenge and creativity. The service had limited display space. They should consider methods to empower and value children's interests and achievements. For example, creating a art gallery.

Children and staff were found mostly to be following infection control guidance. For example, they washed hands before snack and after toileting. Hand hygiene should be further improved by children washing hands on arrival, after eating and when returning indoors after playing outside.

Areas for improvement

1. To support children's wellbeing, learning and development the provider should ensure the children have access to a high-quality environment that is safe and secure. This should include, but not be limited to:

- appropriate staffing levels
- · be risk assessed and appropriate safety measures put in place

This is to ensure the care is consistent with the Health and Social Care Standards, which state that as a child, the premises should be adapted, equipped and furnished to meet children's needs and wishes (HSCS 5.18); and my environment is secure and safe (HSCS 5.19)

How good is our leadership?

3 - Adequate

We made an evaluation of adequate for this quality indicator. Where strengths had a positive impact, but just outweighed weaknesses.

3.1: Quality assurance and improvement are led well

The provider's vision, and the service aims include to provide peace of mind for parents to go to work, know children are in safe hands and children are kept safe, warm and welcome. The service should ensure that when undertaking quality assurance, this is at the heart of all self-evaluation and reflection.

There had been changes to the management and leadership within the organisation. As a result, this service had a new manager and staff structure. The manager needs to ensure all staff understand and promote the service aims and objectives. The service needs to ensure that they work together to identify and make the identified improvements to the service. When changes are made systems need to be in place to ensure they are maintained.

Quality assurance systems need to be improved. Systems should identify strengths and areas for improvements. For example, monitoring of medication and accident forms to ensure procedures are being followed. When areas for improvement are identified, a plan needs to be put in place to address these. Further information to support improvement can be found on the Care Inspectorate Hub (see area for improvement one.)

The service needs to ensure that they consult and involve all those using the service more in the service. Parents need to be able to access the service and be kept informed of the service provided to be able to provide meaningful feedback. Children were asked for their views on activities. However opportunities for children to be empowered and reach their full potential need to be further enhanced.

The improvement plan is not used consistently to inform improvement in the quality of the service for children and families. The culture of self-evaluation for improvement is at an early stage of development The culture in the service may not enable staff or families to confidently highlight area for improvement or be involved in the changes.

Information to be provided to Care Inspectorate needs to be accurate and provided within the designated timeframes. Further information on notifications to the Care Inspectorate can be found on the Care Inspectorate on Hub.

Areas for improvement

1. To ensure children receive high quality care and support the provider should ensure the service has a robust quality assurance systems. This should include, but not be limited to;

- evidence-based evaluations
- well thought out plans to manage change and to ensure all involved have the necessary information and resources
- good practice guidance is followed

This is to ensure the care is consistent with the Health and Social Care Standards, which state that as a child, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 9.19) and I experience high quality care and support because people have the necessary information and resources (HCSC 4.27)

How good is our staff team?

3 - Adequate

We made an evaluation of adequate for this quality indicator. Where strengths had a positive impact, but just outweighed weaknesses.

4.3: Staff deployment

The staff employed within the service to deliver direct care and support to the children, were appropriately registered with the Scottish Social Service Council.

The staff team provided a mixed range of skills and experience of working with school age children. They worked well as a team and they told us they were happy in their roles. Through shared leadership they worked together to meet the needs of the children.

Staff met to reflect on what worked well and identify where positive changes could be made. More consistency and continuity in staff is needed to ensure positive changes can become well established.

The staff level met the recommended adult to child ratio. Staff levels and deployment could be further enhanced to meet the needs of the children, support access to outdoors and to keep children safe.

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? | 3 - Adequate |
|--|--------------|
| 1.1 Nurturing care and support | 3 - Adequate |
| 1.3 Play and learning | 4 - Good |

| How good is our setting? | 3 - Adequate |
|---|--------------|
| 2.2 Children experience high quality facilities | 3 - Adequate |

| How good is our leadership? | 3 - Adequate |
|--|--------------|
| 3.1 Quality assurance and improvement are led well | 3 - Adequate |

| How good is our staff team? | 3 - Adequate |
|-----------------------------|--------------|
| 4.3 Staff deployment | 3 - Adequate |

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