

# Firtrees Nursery & Out of School Care Day Care of Children

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**Type of inspection:**  
Unannounced

**Completed on:**  
28 October 2022

**Service provided by:**  
Amcol Scotland Ltd

**Service provider number:**  
SP2003000911

**Service no:**  
CS2003004432

## About the service

Firtrees Nursery & Out of School Care is registered to provide care to a maximum of 288 children up to the age of 16 years.

Care is provided over one level from 14 spacious playrooms. The service is located next to New College Lanarkshire - Motherwell Campus. The building was specially designed to meet the needs of the number and age of children attending. It has fully enclosed garden areas. Public transport, local parks and community facilities are nearby.

## About the inspection

This was an unannounced inspection which took place between 24 October 2022 and 28 October 2022. Feedback was shared with the manager and managing director on 28 October 2022. The inspection was carried out by four inspectors from the Care Inspectorate. 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 since the last inspection. In making our evaluations of the service we:

- spoke with the children using the service and 31 of their family members
- spoke with staff and management
- observed practice and interactions
- reviewed documents.

## Key messages

- Children received nurturing care and support from staff who were kind, caring and responsive to their needs. This helped build good attachments.
- Staff were committed to their role and had positive relationships with each other which helped create a positive environment for children.
- Staff knew children well and personal plans supported meeting children's needs.
- Children attending the service were happy, settled and confident moving around the environment.
- Leaders ensured consideration was given to safety, risk assessments and safe storage of hazardous materials.
- Play spaces should be developed to ensure all children can be supported to learn and develop through high quality play experiences.
- The balance of adult led and child initiated experiences should be reviewed to ensure that children are meaningfully and actively involved in leading their play and learning.
- Quality assurance processes could be further developed.

## 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?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

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 evaluated this key question as adequate. While the strengths had a positive impact, key areas needed to improve.

### 1.1 Nurturing care and support

Children received nurturing care and support from staff who were kind, caring and responsive to their needs. For example, there was lots of laughter, cuddles and tickles. This helped children build secure attachments to staff. Many parents agreed that careful consideration was given to children's care routines at home and every effort was made to replicate them in nursery for consistency, supporting their wellbeing. One parent told us "the care and nurture that they provide is exceptional."

Children were warmly welcomed when they arrived at nursery, helping them feel safe, loved and cared for. Staff took time to speak with parents when arriving or leaving the nursery with their child. This helped ensure relevant information was passed on to meet children's needs and took account of changes to their routine.

Children's overall wellbeing was supported through information gathered in personal plans. Staff worked closely with families to ensure they had the right information to meet their needs. Individual learning targets and strategies were identified to help support children's wellbeing and promote learning opportunities. One parent told us "we are always included in discussions about my child's progress and development, and our suggestions are always taken on board and actioned by staff."

Staff and parents were looking forward to face to face parents' meetings which were held during the week of inspection. This provided a valuable opportunity to discuss children's progress and share information, helping to promote positive relationships between families and improve outcomes for children. One parent told us "I have always felt very well informed of my child's progress and experiences."

Children enjoyed mealtimes in an unhurried and relaxed atmosphere, contributing to a sociable experience for children. One child told us "the snack is good." Children enjoyed meals offered and had a choice if they preferred their own packed lunch. This ensured that children's preferences and dietary needs were met.

Mealtimes could be developed to support children's independence. More opportunities to prepare food, self-select and serve, would help build children's confidence and develop skills for life. More information on supporting positive mealtimes can be found on our website.

Drinks were available throughout the day which helped ensure children were encouraged to stay hydrated. We discussed with the manager that they should consider promoting water as the main drink throughout the day, to help maintain healthy teeth.

### 1.3 Play and Learning

Children across all age groups had access to move freely within their areas and chose to take part in the activities and experiences on offer. This helped them build relationships with other children. One child told us "come and see all my friends here, I've got so many."

Children were encouraged to take part in many activities to support their learning for example, sensory play, arts and crafts and storytelling. The recently developed Science, Technology, Engineering and Maths (STEM) rooms, supported older children to develop their mathematical thinking and problem solving skills.

Staff working with younger children were skilled at providing opportunities for play with natural materials. For example, wooden objects, mirrors and textured materials. Children enjoyed using their senses by exploring, touching, shaking and listening. This helped build and secure attachments in their brain. One parent told us "staff go above and beyond to implement meaningful, sensory, responsive learning experiences suited to my child's age and stage of development." Older children would benefit from this type of play to promote their creativity and curiosity.

Babies were supported to develop their physical skills with opportunities for crawling, rolling and pulling themselves up to standing. However, some babies also spent time in baby walkers and bouncers, which if used too often could delay physical development. The staff should review the use of this equipment to ensure that young children have opportunities to move independently, developing their physical skills.

Some staff made effective use of language to extend children's thinking skills. For example, "try this", and "look at this". However, overall staff needed to develop a better understanding of child development, and how to support children to express their ideas and creativity.

Children attending the out of school care had opportunities to lead and direct their own learning experiences. For example, they could move freely between indoors and outdoors and could choose from a wide variety of resources and play spaces that were age appropriate. Children invited staff to join in play which allowed for valuable opportunities to develop relationships and deepen their learning.

Whilst we found children attending the out of school care had positive opportunities to lead their play, this was not the case for some younger children. Staff should review routines to ensure children have maximum opportunities for play that supports their needs. For example, some children had limited access to outdoor play. One parent told us "the service could improve by children having more outside time."

Staff regularly discussed children's progress to plan for future learning opportunities. However, we found the balance of adult led and child initiated experiences should be reviewed to ensure a more balanced approach. This will help ensure children are meaningfully and actively involved in leading their play and learning. This will help promote children's curiosity, imagination and creativity (see area for improvement 1).

## Areas for improvement

1. To ensure that children are supported to develop their learning, the provider should make sure staff access training on providing high quality play and learning, and apply it in practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

## How good is our setting?

## 4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

### 2.2 Children experience high quality facilities

Children attending the service were happy, settled and confident moving around the environment. Children experienced care and play in spaces that were bright, clean and well ventilated. Playrooms and outdoor spaces were secure, helping to keep children safe.

Children accessed a variety of toys and play equipment to encourage engagement and interactions with other children and staff. Most play spaces reflected children's interests and stages of development. For example, home area, book corner, art and crafts, construction, puzzles, dressing up, dolls and train sets. Leaders and staff should consider how play spaces could be developed further. This includes creating more cosy spaces for children to rest, relax and support their wellbeing.

Garden spaces needed to be improved to ensure children experience high quality outdoor play to support their wellbeing. We discussed this with the leaders, who stated they plan to develop the outdoor play spaces by repairing and replenishing play equipment and toys. We discussed how more open ended resources would offer children opportunities for challenge and help develop imagination and problem solving skills.

There were a variety of measures in place to help ensure children were kept safe. For example, risk assessments, daily checklists of play spaces, a secure entrance and safe storage of medication and hazardous substances. Almost all staff had participated in recent health and safety training. This helped to ensure a consistent approach was applied when assessing play experiences and creating a safe environment for children. One parent told us "I am confident that I am leaving my child in a safe, secure space."

Overall, infection control practices minimised the potential spread of infection. For example, handwashing at key points such as before eating and effective cleaning of touch points throughout the day. One parent told us "I have found the nursery to always be clean and well maintained."

However, we identified that improvement's were needed in some of the toilet and nappy changing areas to ensure these areas were in line with best practice guidance. For example, children under two years must have a self-contained designated nappy changing room. This is because they are especially vulnerable to infection due to an immature and developing immune system. We discussed this with the manager and provider and they have agreed to consider how improvements can be made (see area for improvement 1). We signposted the provider to 'Nappy changing facilities for early learning and childcare services: information to support improvement'.

All families have access to a secure, online application, to share and receive information about their child. This information is stored securely in line with data protection guidance. Permission is sought from families to ensure all wishes are respected.

### Areas for improvement

1. To ensure that children's health, wellbeing and privacy is protected the provider should improve the nappy changing facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4); and 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4).

## How good is our leadership?

## 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas needed to improve.

### 3.1 Quality assurance and improvement are well led

A range of processes were in place to support improvement and promote positive outcomes for children. However, further work was needed to ensure self-evaluation and improvements impacted positively on children's play and learning.

Families had recently been involved in refreshing the vision for the service. The revised vision included providing a service that is welcoming, well-resourced and interesting, that supports children to reach their full potential. We discussed how staff training and improvement plans would help support the service to deliver this vision.

A variety of systems were in place to support communication between families. For example, the use of emails and online learning journals. Parents told us they really liked receiving photographs of their child and seeing how they were progressing. The manager recognised that there was still opportunity to engage with families more meaningfully about issues that were important to them. This had been included in the service's improvement plan.

The views of children and families were actively sought to inform the development of the setting. However, some parents told us they would like more information about what happens with their feedback. This would help ensure families are clear about how their ideas and suggestions are used to help the service improve.

Staff were aware of best practice guidance to support their practice. All staff were committed to their continuous professional development and had participated in some learning that supported them to meet children's needs. This was encouraging staff to learn new skills that improved children's experiences.

Some training had supported staff to keep children safe. For example health and safety, child protection and risk assessment. Staff were in the early stages of learning about child development and high quality play. To ensure that training impacts positively on outcomes for children, staff should meaningfully reflect on the changes needed to practice as a result of their learning.

Leaders should build on current monitoring processes, to ensure they take account of best practice guidance and lead to sustained improvement for children. Self-evaluation and monitoring should ensure high quality learning through play is at the heart of improvement planning (see for improvement 1).

The service failed to notify the Care Inspectorate of some serious incidents. This meant we were unable to assess if appropriate action had been taken at the time, to reduce risk to children. During the inspection process, these notifications were submitted and we were satisfied that action had been taken to address potential risks to children. The manager agreed to inform us of any significant incidents in the future.

## Areas for improvement

1. To ensure that quality assurance processes impact positively on outcomes for children, and improve the quality of their play, they should be developed to become more robust, helping to identify and prioritise improvements needed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

## How good is our staff team?

**4 - Good**

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

### 4.3 Staff deployment

Staff were committed to their role and had good relationships within each other, which helped create a positive environment for children. One parent told us "I find the staff communicate well with each other", and they receive "a warm and friendly welcome from staff caring for children."

Overall, staff deployment took account of children's needs. Some positive examples of where this worked well included; support staff assisting the youngest children's mealtime, responsive nappy changing and providing one to one assistance where needed to a child to support their wellbeing. However, at key times of the day, in some areas, more staff were needed to enhance children's quality of play. For example, to support outdoor access and experiences.

Children benefitted from staff considering their continuity of care across the day. For example, break times were flexible to meet the needs of children, and staff worked well together to ensure relevant information was passed on to ensure children's needs could be met.



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

### Requirements

#### Requirement 1

The provider must make proper provision for the health, welfare and safety of children. In this instance the provider must:

- a) Ensure a rigorous risk assessment is completed in relation to the management of rodent activity in the outdoor play area. This must fully consider the potential risk presented to children and clearly detail how this will be safely managed.
- b) In the event that rodent activity is observed and traps laid, children must not have access to the area until all traps are safely removed.
- c) Provide training to all staff on the action that must be taken in response to a child coming into contact with a hazardous substance and the medical protocol to be followed in such an event.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 5.19: My environment is secure and safe.

This is in order 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 requirement was made on 1 July 2022.**

#### Action taken on previous requirement

- Most staff had completed health and safety training.
- Senior staff met regularly to discuss risk assessments and these were updated when required.
- All staff had contributed to risk assessments. This had created a better understanding of the purpose of risk assessments. Completed risk assessments were monitored monthly.
- Risk assessments included emergency protocols, including emergency incident or hazardous substance being consumed.
- Completed risk assessments were easily accessible to staff.
- The manager completed in-house training with staff on their roles and responsibilities in relation to health and safety issues. Discussion had also taken place with staff in regard to the difference between a risk assessment and a daily check list.
- Both health and safety and risk assessment training was now mandatory for staff to complete.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

## Met - within timescales

### Requirement 2

The provider must make proper provision for the health, welfare and safety of children. In this instance the provider must ensure that:

- a) Parents are timeously informed of any significant accident or incident involving their child. The accident/incident policy must be updated to clearly detail the procedure to be followed in the event of a child being involved in an accident or incident and the procedures to notify parents.
- b) Improvements are made about how information is shared between staff, should a child be involved in an accident or incident. This must clearly detail the procedure to be followed for the sharing of information between staff, in particular when staff relocate to other playrooms. The review must fully consider the risk of a parent attending to collect their child and not being informed of a significant incident involving their child.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 4.14: My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This is in order 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 requirement was made on 1 July 2022.**

### Action taken on previous requirement

Improvements have been made to the service's accident and incident procedures. For example:

- Senior staff double checked all application forms to ensure emergency contact details were correct.
- Parents were notified as soon as possible of accidents. Records were kept of telephone calls with parents.
- If a child is involved in a serious incident, the nursery manager must be notified immediately.
- Staff received training on record keeping for accidents and incidents.
- Communication between staff had been improved to ensure information is passed on for parents.
- Senior staff were informed of any accidents/incidents.
- Staff breaks had been adjusted to help support communication at the end of the day.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

## Met - within timescales

### Requirement 3

The provider must make proper provision for the health, welfare and safety of children. In this instance the provider must ensure that:

- a) In the event that a child comes into contact with any hazardous substance, medical assistance is immediately sought. The accident and incident policy must be updated to include the procedure to be followed in such an event.
- b) Training is provided to all staff on the procedures to be followed and the medical interventions to be taken, should a child come into contact with a hazardous substance.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 4.14: My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This is in order 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 requirement was made on 1 July 2022.**

#### Action taken on previous requirement

- Emergency protocols were in place for contact with hazardous substances.
- Safety data sheets were available for all substances kept within the service.
- All staff had been informed of the procedures.
- Health and safety and risk assessment policies were updated.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

#### Met - within timescales

### Requirement 4

The provider must make proper provision for the health, welfare and safety of children. In this instance the provider must ensure that:

the dangers of all hazardous substances present in the nursery premises are known to management and staff, and in turn, they know how these substances should be safely managed. A safety data sheet must be sought from any supplier and the contents and safety information contained be readily accessible to all staff.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 5.19: My environment is secure and safe.

This is in order 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 requirement was made on 1 July 2022.**

## Action taken on previous requirement

- All substances used within the service had been reviewed for safety.
- Control of substances hazardous to health (COSHH) folder was reviewed and updated for all hazardous substances. This contained data sheets for all substances held within the building.
- The COSHH folder was easily accessible to staff.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

## Met - within timescales

### Requirement 5

The provider must make proper provision for the health, welfare and safety of children. In this instance the provider must: ensure safety checks are carried out prior to children accessing the outdoor play area and formally record all checks completed. Risk assessments need to be improved to fully identify all potential risks to children and detail how any potential risks can be minimised.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 5.19: My environment is secure and safe.

This is in order 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 requirement was made on 1 July 2022.**

## Action taken on previous requirement

- Most staff completed health and safety training.
- An outdoor checklist had been created, which is completed daily by staff before accessing the outdoor areas. Checklists were signed off by a senior member of staff.
- Risk assessment training with staff included the difference between a risk assessment and a daily check list.
- Any concerns were passed to the nursery manager, who assessed the situation to take any actions required and advise staff.
- The outdoor risk assessment had been updated.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

## Met - within timescales

**Requirement 6**

The provider must make proper provision for the health, welfare, and safety of children. In this instance the provider must: review the daily routine in order that it becomes less task focused, in particular towards the end of the nursery session, when children come together in the one playroom.

To be completed by: 01 August 2022

This is to ensure care and support is consistent with Health and Social Care Standard 5.19: My environment is secure and safe.

This is in order 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 requirement was made on 1 July 2022.**

**Action taken on previous requirement**

- Daily routines were reviewed and cleaning times adjusted. Cleaning of playrooms only to take place if there is a quiet period. Staff did not complete domestic duties at the one time.
- Staff breaks were adjusted to ensure staff were available for passing on communication to parents or other staff.
- Playrooms remained open to children. No areas were closed off.
- Senior staff monitored routines of the playroom and end of day tasks.

We were satisfied that as a result of these actions, provisions were in place to protect the health, welfare and safety of children.

**Met - within timescales**

**Complaints**

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How good is our care, play and learning?	3 - Adequate
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	3 - Adequate
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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