

Spring Oscars @ Buckstone Day Care of Children

St.Fillans Church
Buckstone Drive
Edinburgh
EH10 6PD

Telephone: 07971 094317

Type of inspection:
Unannounced

Completed on:
4 October 2022

Service provided by:
Out of School Scotland Limited

Service provider number:
SP2007009266

Service no:
CS2010279824

About the service

Spring Oscars @ Buckstone is registered to provide a service to a maximum of 80 children at any one time of primary school age, with a maximum of 40 children at St Fillans Church and a maximum of 40 children at Buckstone Primary School.

Both sites are located in residential areas with good transport links.

At the school site children have access to one large gym hall and the school playgrounds.

At the church site children are accommodated in a large hall. They have access to the front and side gardens.

About the inspection

This was an unannounced inspection which took place on Tuesday 27 September 2022 between 15:30 and 18:00. We returned to the service on Wednesday 28 September 2022 between 14:00 and 18:00 and Friday 30 September 2022 between 12:45 and 17:00 to complete the inspection. A feedback session took place on Tuesday 4 October 2022.

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 twelve children using the service
- spoke with six parents and carers in person and through email
- spoke with six staff and the manager
- observed practice and children's experiences
- reviewed documents.

Key messages

The consistent staff team helped create a sense of familiarity for children. Children had developed positive, warm relationships with staff and their peers.

Children had opportunities to be active in a number of outdoor spaces.

Children were enabled to explore their creativity through art and crafts experiences.

Resources and play spaces needed to improve so that children had more varied and interesting play experiences.

Children did not experience a homely, comfortable environment. Improvements were needed to enhance the quality of the environments.

Staff knowledge and understanding of children's medical needs and medication arrangements needed to improve to help ensure children's wellbeing.

To improve the approach to maintaining children's safety, the arrangements and procedures for children's transitions to and from the service needed to be reviewed and improved.

Children would benefit from staff developing their approaches to supporting play and engagement. Staff often became task focused and missed opportunities to support and engage with children.

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

1.1 Nurturing care and support

Children had positive peer relationships and were respectful of each other. A number of children told us they enjoyed the time they had to play with friends.

Children had developed positive, warm relationships with staff. Staff checked in on children as they played and helped facilitate activities such as crafts and sports games. The consistent staff team helped create a sense of familiarity for children.

Staff knew children well and were able to demonstrate the ways they used their knowledge of children to plan care. Personal plans were being updated at the time of the inspection. This work should continue as for some children there was a lack of information. This meant there were some missed opportunities to implement strategies of support.

The service had introduced a more flexible snack routine, which promoted children's choices about when they would like to eat. Snack choices were healthy, which supported children to have a balanced diet. However, to ensure snack is a consistently nurturing and enjoyable experience improvements were needed. At times, staff became task focused and missed opportunities to support children or help enrich the mealtime experience. Staff should develop their practice to ensure they are readily available to support daily routines. This would include staff being available to sit with children while they eat.

To help ensure children's wellbeing, staff knowledge and understanding of children's medical needs and medication arrangements needed to improve. While most staff were aware of children's medical conditions, not all staff were confident in how these conditions may present. For example, some staff were not sure on the signs or symptoms and what medication or action was needed. To ensure children's health and wellbeing is maintained, the provider must ensure staff have the knowledge and skills to safely meet children's medical needs (requirement 1).

Improvements were needed to the arrangements and procedures for children's transitions into and from the service. On the day of the inspection, a number of older children arrived at the church site prior to staff arriving back meaning there was no one there to welcome them. Also, this had the potential to compromise safety as although children were within the church grounds, the site is close to a main road. During the inspection, there had also been a further incident of a child not arriving at the service as planned. The service were alert to this and implemented procedures to locate the child. However, as a result of these issues, the arrangements and procedures for children's transitions to and from the service needed to be reviewed and improved. This is to help ensure children's safety and wellbeing (area for improvement 1).

1.3 Play and Learning

Children had opportunities to be physically active in a number of outdoor spaces. This supported their overall health and wellbeing.

Children were enabled to be creative through art and crafts experiences. Many children enjoyed making junk models and drawing. These opportunities supported them to use their imaginations and share their ideas through art. The introduction of an 'inventors box' allowed children to explore different open-ended materials, developing their natural curiosity and creativity.

Overall, improvements were needed to the range and quality of resources to enable children to have more interesting and challenging experiences. While children did have access to puzzles, games, small world and some construction materials, these did not always meet the varying needs and ages of children attending. Some resources were tired and worn while others did not reflect the current and varied interests of children. Older children told us they sometimes got bored and felt many of the toys and games were more suited to younger children. Children need opportunities to lead their own play and self-select from a range of resources that support their needs and interests. To promote challenge and enhance play experiences, improvements should be made to the range and quality of resources (area for improvement 1).

Some staff were familiar with best practice guidance in relation to play and this helped them to facilitate interactions and support the extension of play. Some staff used effective interactions and questioning to enrich children's play. For example, asking children their thoughts on how to play a game, providing resources or celebrating achievements. However, this was not always consistent. For example, some staff stopped play situations from developing, limiting children's ability to lead their own play and make choices. To support children to have more meaningful play experiences, staff should develop their practice in relation to supporting children's play and experiences.

Requirements

1. By 9 November 2022, the provider must ensure children's health care needs are managed effectively to promote their safety and wellbeing.

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

- a) ensure medication is stored, managed and administered in line with the guidance, 'Management of medication in daycare of children and childminding services'
- b) ensure the information recorded in relation to children's health care needs and/or medication includes all relevant details needed to keep children safe. This would include ensuring information is accessible to all staff and that within the information there is a stepped approach to manage any emergency situations
- c) ensure information is agreed with parents and reviewed by parents when required and as a minimum each term
- d) ensure staff have the information and skills required to keep children safe
- e) implement an effective quality assurance system to ensure children's medical needs are being met in line with good practice guidance.

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 the Health and Social Care Standard which state that: 'Any treatment or intervention that I experience is safe and effective (HSCS, 1.24)'.

Areas for improvement

1. To promote children's safety and wellbeing, arrangements and procedures for children's transitions to and from the service needed to be reviewed and improved.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that: 'I am as involved as I can be in agreeing and reviewing any restrictions to my independence, control and choice' (HSCS 2.6) and 'I am helped to feel safe and secure in my local community' (HSCS 3.25).

2. To promote challenge and enhance children's play experiences, improvements should be made to the range and quality of resources and equipment. Children should experience an enabling environment that meets their varying needs. This would include but not be limited to, the introduction of loose parts materials and resources which meet the varying ages and interests of children attending the service.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state 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) and 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

How good is our setting?

3 - Adequate

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

2.2 Children experience high quality facilities

Appropriate infection prevention and control measures supported the cleanliness of the space and minimised the spread of infection. For example, staff cleaned tables prior to children eating. Children washed their hands at appropriate times, with staff encouraging them when needed. Resources for handwashing were in good supply. However, during the inspection we identified an issue with the number of toilets available in the service. We will work with the provider to address this.

The physical environment was safe. Measures such as daily checklists supported staff to record and action any issues. Walkie-talkies were used to facilitate and support children's movement within the settings. This helped staff to effectively supervise and support children when they were on-site. For example, children were familiar with the agreed boundaries and staff communicated with each other when children were moving from one space to another. Following a recent incident where children had left the setting, the manager and staff should continue to be alert to the measures in place to maintain children's safety. For example, we advised using visual aids to highlight the agreed boundaries. This would provide children with a prompt to help keep them safe. Children's transitions to and from the service did need to improve. We have made an area for improvement about this within 'How good is our care, play and learning?'.

The noise and atmosphere in both sites did not always promote a nurturing, welcoming environment. Some children told us they did not have any quiet or cosy spaces to go if they wanted time away from the larger group. One child told us that they sometimes felt they got headaches due to the noise levels. A lack of soft furnishing and designated cosy spaces meant children's opportunities to relax were limited. Although a few items of soft furnishing were available, improved materials and appropriate equipment should be provided to ensure children experience a homely and comfortable environment. To promote a nurturing, welcoming

experience for all children, the service should make improvements to the environment and management of the sessions (area for improvement 1).

Spaces and resources needed to improve to ensure children experienced an interesting and inviting environment. The service had tried to create designated spaces for different activities but these were often under resourced and poorly designed. For example, a reading area had a few books and some poor quality cushions. Two children told us they wanted to use the space but did not find the resources inspiring. Children would benefit from more opportunities to explore loose parts materials and open-ended resources. Loose parts provide fun for varying age ranges and would support children to have greater levels of challenge. We have made an area for improvement about resources within 'How good is our care, play and learning?'.

Areas for improvement

1. To create a nurturing, welcoming environment and to promote children's wellbeing the provider should improve the physical environment and spaces. Children should experience an environment that is comfortable and inviting.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that, 'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax' (HSCS, 5.6) and 'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS, 5.20).

How good is our leadership?

3 - Adequate

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

3.1 Quality assurance and improvement are led well

The manager and staff team were committed to consulting with children on their choice of activities. As a result, some planned experiences were offered and enjoyed. For example, a craft activity based on dragons was part of the plan for one session. Despite this, there were times when experiences and activities were not sufficiently engaging and inviting. To improve children's overall experiences, the manager and staff should continue to consult and collaborate with children to develop the service further. For example, taking account of the children's views on the improvements needed to the environment and resources. This could help ensure children have consistently positive and inviting experiences that promote their interests and needs.

Progress was at an early stage in relation to the identified areas within the current service improvement plan. Through team reflections, the manager and staff had agreed on areas of development and the team were committed to making improvements to enhance children's experiences. For example, they had identified that children needed more opportunities to explore open-ended materials, and had begun to consider how these could be incorporated into the spaces. However, more work was needed to progress the improvement plan and make significant, positive changes. The manager was receptive to the areas of improvement highlighted during the inspection and was able to discuss immediate changes that they could introduce. This highlighted the manager's capacity to take on advice and understand how outcomes for children could be improved (area for improvement 1).

Some key areas of the service needed to improve, for example, the management of medication and the quality of resources. Evidence gathered showed inconsistencies in practice were not fully identified. Quality assurance procedures did not effectively or consistently highlight areas for improvement. The manager had limited opportunities to carry out quality assurance work, which meant there were gaps in the quality of the service. Overall, quality assurance procedures, including self-evaluation and improvement planning needed to improve. This is to support the service to make and sustain improvements to improve outcomes for children (area for improvement 1).

Parents shared that the manager was receptive and supportive when they had queries and feedback. For example, when updating children's care needs or supporting with interests. However, feedback from some parents showed that communication with the wider organisation needed to improve. To increase parents confidence with the overall organisation, improvements should be made to the support parents are provided with when raising queries or administrative requests.

Areas for improvement

1. To ensure the outcomes for children improve, the provider should implement effective quality assurance processes including improvement planning and self-evaluation approaches that recognise strengths and address areas for improvements.

This is in order to ensure 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).

How good is our staff team?

3 - Adequate

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

4.3 Staff deployment

Core staffing in the service had been consistent. This promoted positive relationships between children and staff. Children were familiar with key staff and sought them out for support when needed. This contributed to children's sense of security and wellbeing.

The staff team were flexible and supported each other across the sessions. For example, they communicated about their movements and shared information about what they were doing. This meant they could make appropriate decisions about where to deploy themselves throughout the session. This supported children's supervision and care.

While staffing levels met minimum ratios, at times staff became task focused and missed opportunities to effectively and sensitively engage with children. Similarly, the tasks and routines of the day often interrupted children's play. For example, most staff began to tidy up the resources and experiences well in advance of the session ending. This meant children's play was directed and dictated by staff at this point of the session. Some staff told us they felt staffing levels were stretched and at times this meant they could not effectively engage with all children. To support engagement with children, staff deployment should be reviewed to ensure that any tasks and routines are planned in a way that enhances children's experiences (area for improvement 1).

Some staff needed support to promote consistently respectful interactions and help create a calm, nurturing space. At times, staff positioned themselves poorly and shouted across the rooms to direct children. These actions increased noise levels and did not role-model positive behaviours. To support a calmer, nurturing environment, staff should be supported to consider their practice, positions and actions when engaging with children (area for improvement 1).

Areas for improvement

1. To support engagement with children and the quality of experiences, staff deployment and practice should be reviewed and improved. This should include, but not be limited to, ensuring that any tasks and routines are planned in a way that enhances children's experiences and supporting staff to consider how their deployment can impact on the interactions they have with children.

This is in order to ensure 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, are able to reflect on their practice and follow their professional and organisational codes' (HSCS, 3.14).

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	3 - Adequate
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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