

Abbey Playgroup Day Care of Children

Abbey Church
West Abbey Street
Arbroath
DD11 1EQ

Telephone: 07960 352 805

Type of inspection:
Unannounced

Completed on:
1 December 2022

Service provided by:
Abbey Playgroup

Service provider number:
SP2003000544

Service no:
CS2003002741

About the service

Abbey Playgroup provides a day care of children service. The service is provided from a church situated within a residential area of Arbroath and is close to local amenities, such as greenspaces, shops, and parks. The setting is registered to provide a care service to a maximum of 24 children at any one time from the age of two years and not yet attending primary school. Children are cared for within a dedicated playroom at the rear of the church and can access a rear enclosed garden.

About the inspection

This was an unannounced inspection which took place on 28 and 30 November 2022 between 09:15 and 14:45. Two inspectors carried out the inspection.

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 evaluation we:

- spoke with children and parents using the service.
- spoke with the staff and management.
- observed practice and children's experiences.
- reviewed documents.

Key messages

- Most children experienced welcoming and kind interactions which supported their wellbeing.
- All parents and children should be included in the review of mealtimes.
- To ensure children's safety and wellbeing, further work is needed to assess the environment and ensure that any potential risks are robustly identified and minimised.
- Quality assurance processes should be developed.
- Newly recruited staff were not recruited in line with current guidance.
- Most staff supported children in their play and learning.
- Relevant notifications to the Care Inspectorate did not take place.

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?	2 - Weak
How good is our leadership?	2 - Weak
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

1.1 Nurturing care and support

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

Most children experienced welcoming and kind interactions from staff and received cuddles and comfort when needed. This promoted children's emotional wellbeing and a feeling of security. Parents told us:

'The playgroup is so warm and welcoming. It's almost like a second family for us'

'My child runs in and doesn't say bye - so are clearly happy. So far, the staff are doing a great job'.

During transitions not all staff used a gentle and an encouraging approach. For example, we observed staff using a firm voice towards children. This had the potential to impact children's self-esteem and resulted in children not always following staff's instructions. We have asked the manager to include the monitoring of practice as part of their quality assurance procedure, which will be reported on in 'Key question 3: How good is our leadership?'.

Nappy changes were carried out within an open communal toilet space and at times included more than one child in attendance. This approach to nappy changing did not promote privacy, dignity, or respect for children. The manager agreed to review this practice as a matter of urgency. We also highlighted concerns around infection, prevention, and control practices, which has been reported on in 'Key Question 2: How good is our setting?'.

Written personal planning information was inconsistent and support strategies were not always used. Key information, which staff knew, was not consistently captured within plans and we identified key dates to be missing. This resulted in a lack of consistency in the approach for children with an additional support need (ASN). We signposted the manager to 'A guide for providers on personal planning: early learning and childcare' to support the development of personal plans. This would ensure children receive consistent care that is right for them.

Children experienced a relaxed and unhurried snack time. Staff were observed sitting and interacting with children during mealtimes. Children's independence skills were, however, not encouraged or supported as they were not involved in the preparation and serving of meals and snacks. We signposted the team to useful best practice guidance including 'Food Matters' and 'Setting the Table'.

Medication paperwork was not in line with 'Management of medication in daycare of children and childminding services'. Completed records did not outline medical conditions, include confirmation of first dose or include signs and symptoms staff should be aware of. This had the potential to compromise care and wellbeing. The service should review permissions, administration forms, procedures, and their own policy to support future management of medication for children who require medication. The previous recommendation has now been amended to an area for improvement (see area for improvement 1).

1.3 Play and learning

Most staff supported children in their play, learning and development through effective questioning, which extended children's thinking and problem-solving skills. At times the flow of the day was adult led and children's decision making was inconsistent. Children's routines and flow of the day should be reviewed. For example, to include children's voice, interests and choice. This would support natural transitions and prevent children from becoming disengaged.

Some observations and next steps were not consistently logged. The process in place to observe, monitor and plan children's play and learning needs to be improved. For example, we identified several online journals had not been set up or accessed by families. This resulted in limited opportunities for staff to evaluate children's progress and celebrate achievements. The manager should ensure staff have good knowledge and understanding of their role in recording, observing and planning children's play and learning. In addition, the service should review how information regarding learning is shared with families (see area for improvement 2).

Children had access and were observed using resources that were adequate to support play and learning. Resources included natural materials which consisted of sand, water, flowers, stones and baskets, arts and crafts, books and cosy spaces. This supported children's, creativity and access to rest and relaxation. Children's literacy and numeracy were promoted through displays and some discussions with staff. The service should progress with developing the outdoor space to enhance children's outdoor play and learning experience. A parent shared 'I would love for the playgroup to receive a bit more financial support to possibly upgrade some of the equipment and to do up the garden...to make it a better play area for the children'.

Areas for improvement

1. To meet children's individual care needs, the manager must ensure that medication paperwork is in place, reviewing this regularly in line with current best practice guidance.

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

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

2. To support children to achieve their potential, the provider should improve the tracking and recording of children's development. Staff should be supported and provided with the necessary tools and time to observe, plan and share children's learning experiences. This should take account of General Data Protection Regulation (GDPR), data storage, sharing and security.

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

'I am supported to achieve my potential in education and employment if this is right for me.' (HSCS 1.27).

How good is our setting?

2 - Weak

We evaluated this key question as weak. Whilst we identified some strengths, these were compromised by significant weaknesses.

Areas across the playgroup were generally clean and child friendly. Children benefited from an open and airy environment that included natural and homely touches. Free flow between the indoor and outdoor was not in place due to the location of the garden. We discussed with staff how this could be better managed to promote children's choice and ownership of learning.

We identified issues with regards to the service not following best practice infection prevention and control (IPC) guidance, which had the potential to put children at risk of infection. For example, the storage of children's nappy changing items were not in line with current best practice. The service needs to monitor and address IPC issues to support dignity, wellbeing and respect for children (see requirement 1).

Arrangements for security within the setting and outdoors were considered, with doors and gates being locked. Risk assessments were not up to date or effective in identifying and addressing risks; for example, within the garden space there was a broken bench, fencing and other hazardous items. This had the potential to compromise children's safety and wellbeing. Maintenance arrangements to monitor the safety of the environment and maintenance work must be reported and completed within reasonable timescales, with risk assessments updated to support children's safety (see requirement 2).

The safe storage/confidentiality of children's personal information was compromised. For example, staff were using their personal electronic devices to complete key tasks within the setting. We outlined the need for this practice to be reviewed and improved. The provider and manager should ensure a procedure is in place to enable appropriate access to necessary information, whilst maintaining security and confidentiality (see requirement 3).

Accidents and incidents were recorded. We identified limited information within the records and no formal auditing taking place to identify common occurrences or steps to prevent recurrence. To ensure children are kept safe, the service needs to implement a system to effectively track and monitor accidents and incidents (see area for improvement 1).

Requirements

1. By 6 February 2023, the provider must ensure they provide a service in a manner which respects the privacy and dignity of children. Robust processes and procedures should be put in place to prevent the potential risk of infection to children.

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

- a) staff are aware and follow 'Nappy changing facilities for early learning and childcare services: information to support improvement nappy changing items are stored as per nappy changing guidance;
- b) nappy changing procedures are reviewed to take account of the privacy, dignity and respect of children;

- c) management have oversight to identify and address gaps in infection prevention and control practices;
- d) PPE is used and stored in a clean and organised manner; and
- e) all staff are familiar with best practice in regard to infection, prevention and control practices.

This is in order to comply with Regulation 4 (1)(a) and (d) (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 Standards (HSCS) which state that:

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

2. By 6 February 2023, the provider must ensure children's safety and wellbeing is not compromised.

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

- a) that a system is in place to support the reporting and swift action to address maintenance issues;
- b) risk assessments are reviewed and relevant to the service, with staff having an awareness of these; and
- c) risk assessments are robust, include risks and the minimising actions are recorded.

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

'My environment is secure and safe.' (HSCS 5.17)

3. By 6 February 2023, the provider must ensure children's personal information is stored and accessed securely.

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

- a) ensure there are sufficient systems to communicate and share information with families;
- b) children's preferences, learning, needs, and requirements are converse with parents in line the safe storage of information; and
- c) a procedure is implemented to take account the use of technology in the setting.

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

Areas for improvement

1. To ensure children are kept safe, the service needs to implement a system to track and monitor accidents and incidents.

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

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14)

How good is our leadership?

2 - Weak

We evaluated this key question as weak. Whilst we identified some strengths, these were compromised by significant weaknesses.

Safe recruitment procedures were not followed in line with the service's policies and good practice guidance. We identified relevant checks, such as references, were not carried out robustly to ensure the right people, with the right skills and values, cared for children. As a result, this had the potential to compromised children's wellbeing (see requirement 1).

The vision, values and aims of the service had not been updated or reflected in practice, nor did all staff have an awareness of these. These should be revisited with staff and families to promote a positive ethos and a culture of change for improvement.

The service had an improvement plan which required further development to include improvements identified by the staff team. The manager should consider ways to share responsibilities and further support understanding of the impact changes have on outcomes for children. The service had started familiarising themselves with 'A quality framework for day care of children, childminding and school aged childcare'. They should continue with the initial work undertaken to support the necessary improvements.

Quality assurance systems were not effective or embedded, resulting in areas for improvement being missed. For example, we identified several problems around policies and procedures not being in line with best practice, invalid insurance being in place and risk assessments not being accurate or relevant to the setting. The manager had started to take some steps to address these issues at the time of inspection. The quality assurance process should be reviewed and developed to support effective monitoring across the setting (see area for improvement 1).

The service had failed to properly notify the Care Inspectorate of the change of manager and changes to the committee. We reminded the provider of their role in informing the care inspectorate and signposted guidance outlining what must be reported. This is to ensure the service is operating to meet legal and regulatory requirement. A previous recommendation has now been amended to an area for improvement (see area for improvement 2).

Three recommendations were made at the previous inspection. The service met one of the three (see 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Requirements

1. By 27 January 2023, the provider must ensure that all children are cared for and kept safe by safely recruited, competent and skilled staff.

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

- a) ensure all staff in the setting have been recruited in line with 'Safer Recruitment through Better Recruitment' guidance;
- b) put quality monitoring systems in place to ensure the provider has an overview of recruitment within the setting;
- c) develop a system and procedure to ensure all staff maintain a registration with a professional body and follow the codes of practice; and
- d) implement effective systems to monitor and support staff practice.

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

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

'I am confident that people who support and care for me have been appropriately and safely recruited.' (HSCS 4.24)

Areas for improvement

1. To support a culture of continuous improvement that addresses key areas for improvement, the provider should implement robust and effective quality assurance systems to monitor and sustain positive experiences for children across the service.

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

'I use a service and organisation that are well led and managed.' (HSCS 4.23); and

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

2. Information should be submitted to the Care Inspectorate in line with the provider's registration requirements.

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

'I use a service and organisation that are well led and managed.' (HSCS 4.23)

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.

The deployment and number of staff working in the service was adequate to meet the needs of children. The ethos was positive and interactions between staff were warm and respectful. This helped to create an encouraging atmosphere for both staff and children to feel comfortable and secure in. A parent told us 'I can't fault the playgroup at all. I have a lot of respect for what the girls do.'

Staff rotas and children's registers which included times of arrival and departure were not in place. To further support planning and children's individual needs, the service should monitor staff deployment to allow consideration for busier times.

Across the newly formed staff team there were various levels of experience and skills. Roles across all members of the committee and the manager were unclear. The provider should review skills, knowledge and experience to inform staff training and professional development. Clear roles for all should be established, to ensure these effectively guide and support accountability, effective leadership and drive improvement. This will help children experience quality care which supports their overall development delivered by highly skilled individuals (see area for improvement 1).

The induction for new staff was limited in enhancing skills, knowledge and understanding. The tools and guidance for new staff was incomplete. To support continuous improvement, the provider and manager should review the induction for staff. We signposted the manager to the benefits of using the Scottish Government 'Early learning and childcare - national induction resource' (see area for improvement 2).

Areas for improvement

1. To support ongoing practice and improve outcomes for children, staff should access further training, self-learning, and record reflections. This should include, but is not limited to, awareness of and familiarisation with best practice guidance. The manager should support staff to implement their learning through the mentoring and appraisal process.

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

'I have the confidence in people because they are trained, competent and skilled.' (HSCS 3.14).

2. The induction process should be monitored and reviewed to help new staff build on their understanding and responsibilities. This should include, but is not limited to, ensuring all new staff are supported and have the skills and knowledge to provide children with high quality early learning and childcare.

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

'I have the confidence in people because they are trained, competent and skilled.' (HCSC 3.14).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to meet children's individual care needs, the manager must ensure that medication paperwork is completed fully, reviewing this regularly in line with best practice guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards which state "My personal plan (sometimes referred to as 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)

This area for improvement was made on 23 April 2018.

Action taken since then

At the time of inspection no medication was on the premises and no children required medication. However medication policy, paperwork and systems did not support best practice. This recommendation has been taken forward as a new area for improvement.

Previous area for improvement 2

In order to support children's choice and ability to direct their own play, the service should re-consider the use of the indoor and outdoor environments throughout the session.

This is to ensure care and support is consistent with the Health and Social Care Standards which state "As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences, and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity." (HSCS 2.27)

This area for improvement was made on 23 April 2018.

Action taken since then

During inspection children had access to the outdoor garden space. We did discuss the need to build on the access and the benefits of allowing children more choice when they access this space. However, we were satisfied this recommendation has now been met.

Previous area for improvement 3

The manager should ensure that information is submitted to the Care Inspectorate in line with their registration requirements.

This is to ensure care and support is consistent with the Health and Social Care Standards which state "I use a service and organisation that are well led and managed." (HSCS 4.23)

This area for improvement was made on 23 April 2018.

Action taken since then

We identified that there had been changes of relevant committee members which we had not been notified of. Furthermore, we identified the provider had not notified us of changes to the manager as per their responsibility. This recommendation has been taken forward as a new area for improvement.

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?	2 - Weak
2.2 Children experience high quality facilities	2 - Weak
How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.