

# Happitots Nursery - Glasgow Airport Day Care of Children

Building 52  
St. Andrews Crescent  
Glasgow Airport  
Paisley  
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**Type of inspection:**  
Unannounced

**Completed on:**  
25 August 2022

**Service provided by:**  
Bertram Nurseries Limited

**Service provider number:**  
SP2003002955

**Service no:**  
CS2003004824

## About the service

Happitots Nursery - Glasgow Airport provides a care service to a maximum of 91 children, including:

Baby room - maximum of 12 children up to 2 years of age.

Tweenie room - maximum of 12 children up to 2 and a half years of age.

Tiny toddlers room - maximum of 12 children up to 2 years of age.

Toddler room - maximum of 25 children from 2 years to 3 and a half years of age.

Pre-school room - maximum of 30 children from 3 years to those not yet attending primary school.

The service is provided by Bertram Nurseries Limited in partnership with Renfrewshire Council and is located within the campus of Glasgow Airport. The nursery operates from a single storey building comprised of five playrooms, children's changing and toilet facilities, a kitchen, office and staff facilities. There is a large outdoor play area which has recently been developed to offer children opportunities for fresh air and active play and learning.

## About the inspection

This was an unannounced inspection which took place on Tuesday 16 August 2022 between 09:45 and 15:00. The inspection was carried out by three inspectors 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 throughout the inspection year.

In making our evaluations of the service we:

- Spoke with some of the children using the service and reviewed survey responses from 36 parents whose children attend the service.
- Spoke with the service provider, manager, and staff. We also reviewed survey responses from 13 staff.
- Observed practice and staff interactions with children.
- Reviewed documents.

## Key messages

- . Children were spoken and listened to in ways that encouraged them to feel valued and included.
- . Staff were flexible and supported each other to work as a team to benefit children.
- . The service should consolidate children's personal plans, ensuring children enjoy appropriate support for their development and progress.
- . Staff should continue to develop strategies for developing children's sense of ownership of leading change related to their self chosen play projects.
- . Staff should review daily routines to increase available time and opportunities for young children to experience outdoor play every day.
- . Personal care routines followed by staff and to be improved to better protect children's privacy and sense of dignity.
- . The management team agreed that auditing processes for children's medication could be strengthened to support children's health and safety.
- . The provider to continue to develop an approach to recruitment that builds stability in the staff team through the retention of experienced staff.
- . Risk assessments and procedures related to fire safety should be meaningfully implemented to minimise potential risks to children's safety and wellbeing.
- . The management team should continue to build on the variety of opportunities for staff to lead play based curriculum developments within the service.

## 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 key question as we found performance where there was some strengths, but these just outweighed weaknesses. The strengths had a positive impact but the likelihood of achieving positive outcomes for children was reduced because key areas of performance needed to improve.

### 1.1 Nurturing care and support

Children were cared for by staff who showed warm and nurturing approaches, which made children feel welcome and begin to build relationships. A parent told us: "Very nurturing, friendly team, who are quick to respond or resolve any problems or concerns." Another parent commented: "Staff know my child and have good bonds with them". A third parent wrote in our survey: "Nursery seems to have a great ethos, lovely staff who continue to nurture my child - my child is always happy and content going to and leaving nursery." The staff team had worked hard to make sure children's transitions from home back to the setting continued to be a good experience following periods of pandemic lockdown. They understood and demonstrated empathy about the impact of challenges children and their families had encountered during this time. This supported children's emotional wellbeing and helped them feel secure.

Staff were clear about their role in safeguarding children and had attended training to keep their knowledge up to date. This meant they felt confident about the procedures to follow in the event of concerns for children's welfare.

We looked at children's personal plans and noted that these were not always up to date or regularly reviewed and there were inconsistencies in information staff recorded about children. Parents raised this issue in the feedback they provided to us in our survey. For example, one parent commented; "The app isn't updated regularly so other than the brief summary of my child's day when I collect him and the parent's night phone call, I'm not fully updated on what he has been doing. I have no concerns about his care but think we could be updated in more detail." Staff told us they worked hard to produce observation entries for children's personal plans and learning journals but they struggled to ensure they were up to date. The service needs to consider how paperwork and systems of recording information about children could be more manageable and not too time-consuming. We discussed documentation approaches that would support staff to focus more on providing a clear summary of children's key care support and learning needs with relevant support plans, personalised strategies or next steps. As part of the service quality assurance, the manager should monitor whether personal plans are current to the child's individual needs and include relevant information required to care for children. We signposted the management team to our personal plan guidance that will assist staff in consolidating how they record the information about children.

<https://hub.careinspectorate.com/how-we-support-improvement/care-inspectorate-programmes-and-publications/personal-planning-guides-for-providers/>

We highlighted to the management team steps to take to fully implement current national guidance associated with the recording and administration of children's medication. We have provided the link for the guidance here: <https://hub.careinspectorate.com/media/1549/management-of-medication-in-daycare-of-children-and-childminding.pdf>. This can further enhance the development of the staff's understanding of the appropriate procedures to follow to ensure the safe administration of medication including the need for accurate dosage records and for each individual child's medication to be kept separate and stored in an individual container clearly labelled with the child's name and date of birth.

We observed personal care routines followed by staff and found these could be improved to better protect children's privacy and sense of dignity. For example, within the baby room, we highlighted the value to staff of closing nappy changing room doors to provide children with privacy during intimate care routines. We observed babies sitting together on playroom floors dressed in nappies rather than clothed although this was not for a prolonged period. We discussed with staff how children's dignity could be enhanced by reviewing approaches to dressing the youngest children after nappy changing. We highlighted the value of ensuring this was carried out by familiar key adults.

### 1.3 Play and learning

In the three to five playroom and outdoors there were plenty of well considered open ended materials and creative approaches that successfully engaged children's interests and enriched their play and learning. Children engaged in a range of collaborative play opportunities and creative experiences that supported their imagination to flourish. The use of questions from staff helped children to extend their thinking and consolidate their thoughts and ideas through play.

We discussed with staff strategies for developing children's sense of ownership of leading change related to their self chosen play projects. Staff agreed that more flexible use of big books or similar planning tools that were based on observations of children's most engaging and involving play experiences could strengthen existing opportunities for children to shape their play environments.

We highlighted the value of linking staff observations of patterns of the youngest children's play behaviour or 'schemas' more closely and consistently to children's individual observations of learning. This approach can help staff to identify what will hold individual children's interest as well as help them with the stage of development that they are currently working through. It can consolidate existing approaches to settling in and promoting a sense of security in new children by recognising their achievements at home. Staff agreed that this will further demonstrate how the nursery's approach to supporting children's play is personalised.

### Areas for improvement

1. In order that children experience high quality care and support the provider should ensure that care plans which reflect children's care needs are fully completed and up to date. Where a specific need is identified care plans should detail how individual children will be supported and agreed and shared with parents. Children's care plans should be reviewed at six monthly intervals.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices". (HSCS 1.15)

2. In order to ensure that medication is safely managed and is in line with best practice guidance the provider must ensure that all members of staff working in the care service understand and implement current guidance associated with the recording and administration of medication. We have provided the link for the guidance here: <https://hub.careinspectorate.com/media/1549/management-of-medication-in-daycare-of-childrenand-childminding.pdf>

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "Any treatment or intervention that I experience is safe and effective". (HSCS 1.24)

## How good is our setting?

## 3 - Adequate

We made an evaluation of adequate for this key question as we found performance where there was some strengths, but these just outweighed weaknesses. The strengths had a positive impact but the likelihood of achieving positive outcomes for children was reduced because key areas of performance needed to improve.

We looked at the nursery environment and resources within it in terms of how they were managed to support positive outcomes for children. The nursery play spaces included the provision of open-ended and natural resources. Spaces were set up in ways that were adaptable and had potential to encourage children's creativity. Staff told us that they regularly evaluated and reflected on the quality of children's play spaces.

We identified a need for these shared reflections to focus more closely on how setting up and monitoring of each play area can lead to challenging and engaging play opportunities for children. We discussed with staff the need to ensure that all outdoor play environments offer excitement, are richly resourced and appear attractive to children. The outdoor areas required to be monitored to ensure malleable materials such as sand, water and mud are available in sufficient quantities and regularly replenished. This can ensure that play environments motivate children to be creative by linking their play ideas across different contexts.

In the two to three playroom we highlighted to staff the value of reviewing and monitoring the number of playroom organisation and layout of resources to ensure play spaces were more inviting to children and provided more opportunities for children to develop their sense of curiosity. We have asked that improvements are made to the quality of resources available to children and layout of the two to three playroom to ensure children can engage in purposeful play that supports them to widen their thinking and consolidate their learning through play.

We identified a need for staff to review daily routines to increase available time and opportunities for young children to experience outdoor play every day. We discussed with staff strategies to help ensure babies and toddlers had the right balance of stimulating and calming indoor and outdoor environments to suit their needs. Outdoor play in different environments can encourage young children to move their body in different ways and widen opportunities to learn through their sensory and physical experiences.

We highlighted and staff agreed that regular planned outdoor play opportunities within park and woodland spaces beyond the airport setting would further increase opportunities for children to experience fresh air and enjoy challenging play. The senior management team agreed to make this a focus of future improvement and professional development planning.

We highlighted to the management team the need to review sleeping arrangements within the youngest children's play rooms to ensure that this was timed to meet children's needs, preferences and individual rest patterns. The provider should ensure there are enough beds available in sufficient capacity for young children who want to sleep at any time in across the daily routine.

Staff understood the arrangements for cleaning within the service and risk assessing play spaces. However, some of the areas, such as store cupboards, staffroom and sections of the outdoor environment were cluttered, and unkempt presenting high levels of potential risks to children's health and safety. For example, we found that a staff room fire exit was blocked by a drying frame. We found that a fire evacuation trolley for babies was stored in cluttered storeroom limiting its efficient access in an emergency.

The manager told us that the clutter was partly due a flood in the two to three room on the Friday prior to the inspection which had resulted in lack of soft furnishings and discarded furniture in the outdoor environment.

We highlighted to the management team the need to ensure risk assessments, cleaning schedules and fire procedures were monitored and implemented to contribute to everyone's health and safety.

### Areas for improvement

1. In order to provide younger children with greater opportunities for outdoor play. The manager should develop room monitoring arrangements to ensure all children enjoy daily opportunities to spend time outdoors and provide all age ranges with more exciting and challenging outdoor play experiences.

This is to ensure children access daily fresh air and a well maintained outdoor environment consistent with the Health and Social Care Standards which state that: "As a child, I play outdoors every day and regularly explore a natural environment" (HSCS 1.32), 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).

2. In order to ensure a safe environment is provided to children the provider should improve the implementation and monitoring of service risk assessments. Risk assessments should clearly identify any potential risks to children including those related to fire safety and identify how any potential risks can be minimised.

This is to ensure care and support is consistent with Health and Social Care Standard 5.17: "My environment is secure and safe".

### How good is our leadership?

### 3 - Adequate

We made an evaluation of adequate for this key question as we found performance where there was some strengths, but these just outweighed weaknesses. The strengths had a positive impact but the likelihood of achieving positive outcomes for children was reduced because key areas of performance needed to improve.

#### 3.1 Quality assurance and improvement are led well

Staff warmly welcomed children and parents commented on sharing information at these handover times, to ensure children were settled and there was continuity in their care. We discussed with the manager how while there had been recent significant staff turnover she supported her changed team to reach their potential through the use of appraisals, peer observations, and the staff development and review process. We found that shared reflections and development opportunities were beginning to support the management team and staff to influence change. We found the staff were motivated to develop leadership roles to take responsibility for delivering future improvement initiatives linked to professional training in play based learning and observation strategies. The management team should build on the variety of opportunities for staff to lead curriculum developments within the service. We discussed with the management team the value of extending training opportunities linked to wider champion roles for staff. The management team agreed that this would support more staff to lead developments in child centred planning as well as play based learning. This approach has the potential to enhance the depth and range of children's learning.

We found that the service's leadership approach supported improvement planning across the staff team. All staff contributed to the service's improvement plan that set out the service priorities and expectations for improvement. Some work was at an early stage and there was a need to continue to develop approaches to self-evaluation. For example widening children's daily access to outdoor play and ensuring regular updates to personal plans had been agreed as improvement goals but the evidence we gathered during our inspection showed limited progress had been made. Staff were becoming familiar with the Care Inspectorate "A quality framework for daycare of children, childminding and school-aged childcare" (Care Inspectorate, 2022).

Overall the approaches that were developing had the potential to ensure everyone involved within the service to develop a shared understanding of its vision, values, strengths and improvement needs.

## Areas for improvement

1. In order to ensure that improvement planning is effective in delivering improved outcomes and experiences for children the provider should develop and implement an effective system of quality assurance to monitor improvements in all areas of practice highlighted in this report. The manager should ensure that they have:

- a) Implemented a regular and effective support and supervision programme for all staff.
- b) Worked to meet the training and development needs of staff relevant to this report.
- c) Utilised the Care Inspectorate "A quality framework for daycare of children, childminding and school-aged childcare" to engage staff in the systematic evaluation of their work and the work of the service.
- d) Put in place an effective system for monitoring staff practice that supports the improvement and development of staff practice and children's experiences.
- e) Monitored and evaluated the deployment of staff to ensure that there are enough staff working to meet the needs of all children throughout the nursery day including lunchtimes.

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 made an evaluation of adequate for this key question as we found performance where there was some strengths, but these just outweighed weaknesses. The strengths had a positive impact but the likelihood of achieving positive outcomes for children was reduced because key areas of performance needed to improve.

Staff felt well supported by the senior management team and told us that they felt able to approach them with any concerns. Staff worked well together and supported each other. This helped to contribute to a happy and welcoming atmosphere. Recently appointed staff told us that they had been made to feel welcome.



The staff routinely engaged in a range of core professional learning activities that built on and sustained their practice. We found staff were confident in discussing how they had improved their practice as a result of their own professional learning activities. We found that this learning had a positive impact on the quality of experiences for children, their progress and wider improvements in the setting.

We identified a number of adaptations to staffing arrangements during lunchtime routines which would help to better realise the provider's commitment to providing a more relaxed and nurturing environment during lunchtimes. The management team agreed that they needed to do more to ensure that children were joined at the table by the same key staff in small groups for the duration of the lunchtime experience. It will increase opportunities for staff to be responsive to individual needs and support children to develop positive attachments with key adults.

We found that the current national staff recruitment and retention crisis affecting the early learning and childcare sector in Scotland had directly impacted on the mix of skills and experience within the staff team. A significant number of parents raised staffing issues as a common theme in the feedback they provided to us in our survey. For example, one parent commented: "There has been a significant turnover of staff recently, making it difficult for children and families to build relationships." Another parent told us: "The nursery looks to be a bit understaffed at times and I can see the toll this has on the staff trying to stretch themselves between multiple children." During our inspection we observed how these staffing challenges impacted on outcomes for children. For example, we observed that initial settling in routines supporting a young child's transition into the nursery from home not being provided by a child's designated keyworker. We discussed with staff the importance to children's emotional health and sense of security of intimate care, including feeding of babies, being delivered by familiar key adults who are perceived as consistent, reliable, trustworthy, and responsive to their needs.

## Areas for improvement

1. In order to build relationships between children and key workers, encourage communication as well as ensure children receive the support they need, the provider to review staffing arrangements to improve the lunch time experience for children

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state: "I can enjoy unhurried snack and mealtimes in as a relaxed atmosphere as possible" (HSCS 1.35); "My needs are met by the right number of people" (HSCS 3.15); "People have time to support and care for me and to speak with me" (HSCS 3.16); "If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected" (HSCS 1.34).

2. In order to promote continuity in children's care by familiar key adults the provider to continue to develop an approach to recruitment that builds stability in the staff team through the retention of experienced staff.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state: "I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation" (HSCS 4.15).

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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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