

Gilmerton Early Years Centre Day Care of Children

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Telephone: 01316 641 202

Type of inspection: Unannounced

Completed on: 13 January 2023

Service provided by: City of Edinburgh Council

Service no: CS2003015642 Service provider number: SP2003002576



About the service

Gilmerton Early Years Centre is registered to provide a care service to a maximum of 62 children aged from birth to five years.

The centre is located in a residential area of Edinburgh and is within walking distance of local parks and amenities. The stand-alone premises are situated in their own grounds and comprise of four playrooms, toilets/changing areas, kitchen, office, staff and parents room. Children have access to outdoor play areas and gardens.

About the inspection

This was an unannounced inspection which took place on Tuesday 10 January 2023 between 9:15 and 15:30 and Wednesday 11 January 2023 between 9:30 and 14:30. 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 children using the service
- · spoke with four families
- spoke with staff and the manager
- · observed practice and children's experiences
- reviewed documents.

Key messages

- The service was welcoming and most children were happy, settled, and engaged in play.
- · Children enjoyed positive relationships with staff.
- Children's personal plans required regular reviews to be carried out and recorded.

• Further work was needed to improve mealtime routines to ensure that staff practice and approaches supported positive outcomes for children.

• The service must continue to make improvements to ensure that quality assurance processes support the ongoing self evaluation of the service and a culture of improvement.

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, where strengths had a positive impact, but just outweighed weaknesses.

1.1 Nurturing care and support

Children benefitted from staff who were warm and responsive in their approach. They demonstrated they knew children well and had built trusting relationships with them. All parents told us they were happy with the care provided for their children. One parent told us the service was "absolutely brilliant, staff are very attentive and approachable and I feel safe leaving (child) with them".

Children's overall wellbeing was supported as all children had a personal plan. This included information about their care and support needs including personal care, dietary requirements, allergies and any medical needs. However, there was no evidence to support they were regularly reviewed and updated in line with national guidance and legislation. To promote positive outcomes and reflect children's changing needs, information must be reviewed at least every six months (See Requirement 1).

Children who required additional support did not always have effective strategies recorded to ensure their individual care and support needs were being met. We discussed the importance of recording and using this information affectively to meet the needs of children and demonstrate progression (See Requirement 1).

Staff were confident about child protection procedures. They had attended training and knew what their responsibilities were in terms of reporting concerns. Staff knew who to report any concerns to in the absence of the child protection coordinator. This helped to ensure that children were monitored and kept safe.

Children enjoyed a relaxed and social experience at lunchtime. Staff sat with children encouraging social skills and conversation however at times were task focussed and missed opportunities to enhance learning. There were limited opportunities for children to be involved in the planning and preparation of mealtimes and promote independence. We discussed ways to further develop and enhance children's independence through preparation and self serving during lunch and snacktime (See area of improvement 2).

1:3 Play and Learning

Children had fun and experienced a variety of opportunities to meet their needs and interests. They could choose where they wanted to be, which supported choice and decision making. One parent told us "I feel that (child) receives top-rate care at the nursery with a lot of learning opportunities and play".

New planning approaches had recently been introduced and were at an early stage of development. The team were building their confidence with this approach and continued to provide experiences to support and extend learning. Floor books were used to capture and record children's participation in activities and experiences. Some improvements were required to ensure these were consistently responsive to children's interests.

Children's learning and experiences were recorded through observations and photographs.

Learning journals held observations of children that linked to interests within the playrooms. These demonstrated a variety of planned activities. Parents told us they were happy with the information they received of their child's day and one parent told us they enjoyed "feedback at pick up time and seeing photos and observations on the learning journal".

Staff showed enthusiasm in their interactions with children however we saw some missed opportunities for children to be challenged in their play. More effective use of questioning to extend children's play and learning should be promoted. Staff should continue to develop their knowledge and understanding of child development, relevant theory and practice **(See area of improvement 2).**

Requirements

1. By 30 April 2023, you, the provider, must ensure children's overall health, safety, and wellbeing is supported through effective use of personal planning.

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

a) Every child has a suitable personal plan in place which includes strategies of support and progress made.

b) Planned review dates are carried out at least once every six months in consultation with parents, or sooner if a child's support needs change.

This is to comply with Regulation 5(1)(a) and (b) (Personal Plans) 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 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)

Areas for improvement

1. To support children to have positive food and mealtime experiences, you, the provider, manager, and staff should review their approach to mealtimes.

In doing so, at a minimum, consideration should be given to:

a) Providing opportunities for children to develop everyday skills around food preparation, setting the table. and safety;

b) Staff sitting with children so they can be responsive to their needs; and

c) The manager and staff should ensure they have a shared understanding of the value of mealtime experiences for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible.' (HSCS 1.35)

2. Children should experience caring and nurturing approaches to meet their care and learning needs. To achieve this, staff should increase their understanding of approaches which influence and support children to reach their full potential.

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 meets my needs and is right for me.' (HSCS 1.19)

How good is our setting? 3 - Adequate

We made an evaluation of adequate for this key question, where strengths had a positive impact, but just outweighed weaknesses.

2.2 Children experience high quality facilities

Children benefitted from a welcoming environment with natural light and ventilation available in the rooms. One parent told us they "always feel welcomed by staff and (child) loves coming to nursery". To maintain safety, the environment was secured through the use of an entry buzzer system, helping children to feel safe and secure.

Appropriate infection prevention and control measures were in place to help reduce the potential spread of infection. For example, regular hand washing, appropriate storage of personal protective equipment and nappies were in line with best practice guidance. This helped to keep children healthy.

Playrooms had a range of resources that provided opportunities to stimulate and challenge children's interests and learning. Recent improvements had been made to playrooms including a range of natural wooden furniture. Attention had been given to make play spaces more inviting to support play and learning. Home corners were well used across all playroom, however could be further enhanced with more natural, open ended resources and materials. This would further support children to develop creativity and imagination skills.

During the inspection we observed that the layout of toilets for children over two years compromised their privacy and dignity. The area was not enclosed and therefore did not meet best practice guidance for day care settings. This had been a highlighted as an area of improvement at the previous inspection. We discussed with the manager the importance of the required action being taken forward **(See area of improvement 1)**.

Children had regular access to the fully enclosed outdoor play area for fresh air and active play. However, the potential and benefits of outdoor play were limited due to a large section of garden not accessed on the day of inspection. This limited children's opportunities and experiences. Staff need to consider how the environment promotes children's learning and all areas can be fully accessed. One parent told us that their child would benefit from "more outdoor play" (See area of improvement 2).

Areas for improvement

1. To promote children's privacy and dignity, the provider should improve the toilet arrangements for children. This should be done 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 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected'. (HSCS 1.4)

2. To support children's interests and choices, the provider should ensure that the outdoor play and learning experiences for children are fully resourced, planned for and accessible.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices'. (HSCS 5.21)

How good is our leadership?

3 - Adequate

We made an evaluation of adequate for this key question, where strengths had a positive impact, but just outweighed weaknesses.

3.1 Quality assurance and improvement is well led.

The acting manager had been in post for four months and demonstrated a commitment to ongoing improvement within the service. The senior team were reflective of the current period of transitional change, and the importance of ongoing communication across the staff team. Staff told us they felt supported by the "open door policy" the management team promoted.

A planned approach to monitoring and self-evaluation. was at an early stage of development. The manager had introduced a number of quality assurance systems which included spending time in the playrooms observing staff individually and as teams. The manager now needs to build accountability within the team to ensure goals are progressed and achieved. This should include the development and implementation of robust quality assurance processes. This would help assess and highlight areas for improvement, in line with best practice and national guidance (See area of Improvement 1).

The current improvement plan did not demonstrate it had been effective in having positive change and improvement across the service. However the acting manager had developed an improvement action plan which identified key areas of practice that would be the focus of development work. We discussed the importance of staff being included in the improvement process. Clear actions were required to enable realistic measures as to the impact of changes made and help ensure improvements could become embedded over time. All parents told us they were unaware of the service improvement plan. One parent told us "I'm not aware of the service improvement plan but would be interested to hear".

There was evidence that views of children were taken into account and their voices influenced the development of the service, through the planning process and discussions. However more work was required to be carried out with parents to seek their views regarding the quality of the service. The management team acknowledged that communication with parents in decision making would make them feel more included, and give them a sense of ownership.

Areas for improvement

1. To improve upon outcomes for children, quality assurance systems should be developed further to assess and improve the quality of the provision in line with best practice. The team should take responsibility for positively contributing to improvement and be accountable for the quality of their work. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 made an evaluation of adequate for this key question, where strengths had a positive impact, but just outweighed weaknesses.

4.3 Staff deployment.

Staff worked well together and communicated respectfully with each other as a team. They told us that recent staff changes had been challenging however they were keen to work together to make improvements to support children and families. Parents were positive about staff and one parent told us " I cannot express enough how kind and helpful all the staff have been to (child) and myself".

The management team recognised the importance of ensuring that the service was appropriately staffed and were working to ensure consistent staffing during the present transitional period of change. Staff recruitment was currently in process to appoint further members of staff to help support and provide a more consistent team.

We saw staff were flexible and supportive of each other to support the supervision of children. The effective planning of staff breaks minimised disruption to children's routines and ensured there were enough staff to support children at busier times of the day. The management team also supported playrooms during these times of day. This meant children were cared for by staff who were familiar to them and promoted the building of positive trusting relationships.

There was a mixture of staff skills and experience in the setting. We saw positive interactions with children and examples of nurturing and responsive engagement. Sometimes staff were not always aware of the needs of the children in the room and their cues were not always noticed and responded to. Staff should be further informed on positive, intentional interactions. These would help assist and understand the positive impact on children's confidence and learning.

To further support a culture of improvement staff should keep a record of training attended. This would support reflective and consistent practice, and identify the impact of positive changes within the setting.

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

The provider should take appropriate measures to ensure the privacy and dignity of children who require nappy changes to be undertaken in the toilet areas. To support improvement we signposted the service to current best practice guidance available on the Care Inspectorate HUB; 'Space to Grow' and 'Nappy changing facilities for early learning and childcare service: information to support improvement' (June 2018)

Health and Social Care Standards My support, my life

1.4 If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected.

1.19 My care and support meets my needs and is right for me.

5.4 If I require intimate personal care, there is a suitable area for this, including a sink if needed.

This area for improvement was made on 17 January 2019.

Action taken since then

No action had been taken since the previous inspection and a further area of improvement has been been carried forward.

Previous area for improvement 2

This provider should take appropriate measures to ensure the health, wellbeing and safety of children who may require a sleep whilst on the premises. Room temperatures should be monitored and actions taken to reduce potential and actual hazards must be recorded. Appropriate sleep resources, including cots, should be readily available to support the individual sleep routines and needs of children in line with the Scottish Cot Death Trust – safe sleeping practices.

3.14 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.

5.19 My environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes.

This area for improvement was made on 17 January 2019.

Action taken since then

Appropriate resources of cots and mats were available for sleeping children and room temperatures monitored for the comfort and health and safety of children.

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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