

Arcadia@EasterBush Day Care of Children

39 Easter Bush
Roslin
EH25 9RE

Telephone: 01316 508 856

Type of inspection:
Unannounced

Completed on:
31 January 2023

Service provided by:
UOE Accommodation Limited

Service provider number:
SP2018013124

Service no:
CS2018366833

About the service

Arcadia @ Easter Bush provides a care service to a maximum of 78 children at any one time aged between three months to primary school entry.

The service is provided from a purpose built building in the Roslin area of Midlothian. The premises consists of three playrooms which open into a shared multi-purpose area. All playrooms also open out to a large secure garden area.

About the inspection

This was an unannounced inspection carried out on Tuesday 24 January 2023 between 09:50 and 16:00, returning on Thursday 26 January 2023 between 09:40 and 15:20. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included previous inspection information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with children using the service and received feedback from 11 parents by email and telephone
- spoke with staff and management
- observed practice and daily routines
- reviewed documents relating to children's care and the management of the service.

We gave feedback to the manager and provider by videocall on Tuesday 31 January 2023.

Key messages

Children's needs were consistently met by flexible daily routines and staff who knew them well.

A relaxed flow to the day enabled children to lead their own care and learning.

Children were cared for in a comfortable and safe environment which stimulated their natural fun, curiosity and imagination.

A shared vision of compassion and respect underpinned relationships between staff, children and parents.

Quality assurance processes could be further strengthened to ensure they consistently lead to improvements.

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?	5 - Very Good
How good is our setting?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Quality Indicator 1.1: Nurturing care and support

Children were nurtured and supported throughout their daily experience with a strong focus in their emotional wellbeing. Daily routines were very much led by children's needs, wishes and preferences. Staff used their knowledge of each child to plan their care and play opportunities. This demonstrated respect for individual differences and a commitment to getting it right for every child. For example, children were invited to sleep or rest according to their needs rather than during a set sleep time each day. A parent said, "My child's always welcomed onto their room, saying hello and using their name. There are a couple of ladies in their room I can tell that know my child very well and know what and how to make them happy and encourage them to enjoy their time".

Meals were mostly eaten in the large, shared space, however settling children could eat in their own rooms and slowly transition into the larger space when ready. Children were responsible for setting up the tables for their room. Children ate at their own pace, in a relaxed and sociable atmosphere. Staff ate with children to model social behaviours and support if needed, recognising that routines were learning opportunities. Children had opportunities to be independent with pouring their own drinks and eating by themselves, with support being offered if needed. Further opportunities for developing skills such as food preparation took place during snack times in each playroom.

Children's individual wellbeing benefited from effective use of personal planning. Their care and support needs were discussed with parents regularly to ensure consistency between the service and home. Changes to care were recorded and monitored through the pastoral log. These were reflective of how children were being cared for daily. This meant that they were purposeful documents which staff used to ensure children got what they needed. For example, a child was prone to choking and staff were consistent in their approach to support during mealtimes.

Children's allergies and food preferences were managed well to keep them healthy. Daily communication between room staff and the kitchen ensured children's needs were planned for and food was checked for children's safety and wellbeing.

Children were getting the support they needed to reach their full potential. Parents were actively involved in planning their child's care around specific needs, with strategies being consistent. Other professionals were liaised with where needed. For example, occupational and physiotherapists working with the staff team to guide children's care and support. A parent recognised the service's contribution to their child's development saying, "We've seen both our children growing into confident, happy, engaged and independent little characters, with their own network of friends and support".

Quality Indicator 1.3: Play and learning

Children were having fun as they experienced high quality play, learning and development opportunities. Each playroom had a balance of planned activities and free play, giving a flow of opportunities for children to choose from.

Children took the time to consider what was available to them and confidently made decisions in play. Staff used their knowledge and observations of children's play to add or adapt resources. For example, children were enjoying the dinosaurs and so a wider range of them was added into other areas of the room. A parent said, "My children have been supported well with play opportunities and I feel that their interests and ideas are listened to".

Children had opportunities to play alone or together as part of a group. This enabled the practising of negotiation, turn-taking, sharing and problem-solving with their peers. They chose when to involve themselves in daily tasks and staff supported the learning in these. Examples included, babies were wanting to fill and pour with water and got involved in filling up the water tray and toddlers were mixing the powder paint for the easels.

Communication and language development was enabled in different ways which ensured children were supported throughout the setting in their literacy skills. Active play opportunities supported children to develop mathematical understanding through engaging in problem solving skills, such as measuring, weighing and estimating.

Children were empowered to be involved in their play and learning through skilled interactions and actions of staff. Children of all ages were encouraged and supported to be independent in their thinking and actions. Open questions and encouragement from staff gave children time to try new things and practice skills. Children could fully immerse themselves in their play experiences. Staff were skilled at recognising when to involve themselves in play and when to leave children to their tasks. This ensured children were not interrupted.

Children were learning about risk and their place in a social world through conversations during play. For example, staff asked the right questions to prompt children's thinking about how risky a play situation was and how they could minimise the risks for themselves; and to consider their influence or impact on others.

Online learning journals offered a summary of children's interests and learning from their play. They were specific to that child and detailed with next steps for progressing their learning. The service had plans to improve the frequency of information being added to the journals. This would ensure children's progress is being monitored and responded to.

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Quality Indicator 2.2: Children experience quality facilities

The setting was well furnished, comfortable and homely offering a home from home experience for children. Children were welcomed into a bright, ventilated space which was decorated with their artwork and photographs. This helped children to feel secure in the setting and gave a strong sense that they were valued. A parent said, "We were very impressed with the attention to detail Arcadia went to with helping to make the environment comfortable and homely for both our children. It didn't take long at all for both children to feel safe and secure to eat and take naps without us being there which gives us the peace of mind they are well looked after".

The setting's indoor and outdoor environments were developmentally appropriate spaces. The layout of the setting enabled some mixing of age groups, which supported transitions, friendships and sibling contact. Each playroom had its own toilets and changing area so children were familiar and comfortable with their personal care. A large central multipurpose space was used for lunch and dinner dining. This was a sociable space where siblings and friends could sit beside each other if they wished.

All three playrooms were spacious for children to play comfortably. Furniture was low for easy access to resources and to promote independence. A range of core resources were available for all children, such as drawing materials, sand, water, dough. Resources for children to explore, discover and experiment with were plentiful, such as building materials and role play. Children were able to use these materials as they wished, moving them around to suit their play ideas. Children's current interests were visible around the rooms with resources being used to extend their learning. The service had identified a desire to build on their open-ended resources and were taking steps to do that. This will provide endless possibilities for children to be imaginative in play.

All three playrooms had direct access to the garden which children could free flow in and out to. Toddlers and preschool shared garden space which helped foster relationships and supported the flow of learning between age groups. Babies had their own space. Children had grass to run on, paving to cycle on and mud to dig in. Having a range of terrains in a natural environment engaged children in discovering their surroundings and practising the skills needed to move around safely. A parent said, "Outside they have a lovely big safe area with outside toys, slides and a weather proof canopy for some shelter. Both our kids love being outside and it is very rare a day goes by where the coats and hats aren't on for at least a little time. They go on walks and look at the animals and nature".

Children also had regular access to environments outwith the setting, such as forest walks, visiting animals in the fields and a local walking trail. This offered variety and new experiences. Forest school sessions were being re-established to enhance children's outdoor learning opportunities. Weekly outings to a local elderly care home helped children to develop confidence and language skills. Building friendships with older people offered opportunities for children to develop an appreciation for helping others in their community.

Children's wellbeing was considered as the setting and equipment were safe, secure and well-maintained. Resources and equipment were monitored to ensure they continued to be in good repair. Accidents were recorded and shared with parents for children's safety. They were monitored over time to identify any themes or issues to be addressed, such as where equipment was placed.

Staff communicated well with each other regarding their movements and children's activities, resulting in children being accounted for at all times.

Infection prevention and control measures were in place to reduce infection spread. Children were engaged in fun and supportive handwashing to teach technique and good habits for the future. The setting was visibly clean and maintained by a housekeeper daily.

How good is our leadership?

4 - Good

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

Quality Indicator 3.1: Quality assurance and improvements are led well

A shared vision, aims and values positively informed practice. All staff were actively involved in the rooms and worked to a shared ethos of respect, compassion and autonomy for children.

The manager's oversight of the families, staff and provision, contributed to the shared vision and helped improvements to be made and embedded. However, recent events had not been notified to the Care Inspectorate within the timescales set. This is a requirement of registered services. We asked the manager to familiarise themselves with the notification guidance so we are informed of significant events within the service, in a timely manner. This will contribute to the safety and wellbeing of children and provide external assurances of quality.

Children and families were meaningfully involved and influenced change within the setting.

The responsive approach to children meant that they were continually influencing their play environment. Their ideas were heard and their interests were noticed. These were then used to help staff plan engaging, fun and challenging opportunities. For example, the room staff recently reflected on transitions in routines and trialled different approaches to make the daily routine more responsive to what children needed.

Parents were becoming involved through family breakfasts, stay and play sessions and gardening projects. These fun and varied activities gave parents opportunities to find out more about the service and offer feedback for improvements. A parent showed appreciation saying, "Enjoying a family breakfast or dinner at the nursery allows us not only to meet with the staff and parents, it allows my child to show us what they enjoy at nursery, what projects are currently on and allows us to meet their friends and see them playing together". Regular newsletters were used to inform parents of approaches in early learning and childcare, as well as the general life of the nursery. This involved parents in their child's learning journey and supported further learning at home. Planned parent consultation meetings to summarise and discuss children's care, support and learning are being reintroduced in the coming months, following the pandemic. This will support the six monthly reviews to update children's confidential questionnaire, which the pastoral log would then monitor.

Quality assurance, including self-evaluation and improvement plans were in place and were mostly leading to continuous improvement. A range of processes were in place for the manager to check-in on the provision and ensure quality for children. These were mostly influencing change and improvements. For example, being visible in the playrooms enabled the manager to assess staff practice and take action to improve it where needed. As a result, staff had high aspirations for themselves and confidence in their capacity to support children effectively.

However, the quality assurance processes did not consistently impact positively on children's care, support and learning. The inspection process highlighted some gaps in children's personal planning which had the potential to lead to inconsistent care. For example, some medication was not stored according to best practice and had not been reviewed at least every three months. This posed a risk to children getting the right help when needed. Children's learning journals were not consistently updated with new information for parents to view. This meant that parents were not consistently kept informed of their children's progress.

The service demonstrated capacity and drive to build on their strengths. For example, last year's improvement plan focused on transitions which had improved for all children throughout daily routines. Shared leadership enabled staff to take the lead of specific projects such as busy bags for babies. The process of improvement was understood and used to reflect on practice and trial change. The service had knowledge and insight into where they were and where they wanted to go regarding quality of provision. The strong ethos of self-evaluation had led to continuous improvement in the outcomes for children and should continue to do so.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 4.3: Staff deployment

Deployment and staffing levels were effective for ensuring high quality outcomes for children as staffing was planned in an outcome focused way. Transition times such as lunch were staffed to meet children's needs and staff were flexible to respond to that. For example, younger or settling babies could stay in their room to eat; and enough staff were present during visits out of the setting to facilitate positive experiences for children.

Each room had a combination of qualified practitioners and trainees. Staff were consistent for children across the day and week, allowing relationships to build. A parent said, "Staff seem to genuinely care about their work and the children, and my children have formed healthy, positive attachments with a range of staff". The ethos and approach to children was shared across all staff. This suggested good role modelling and monitoring of practice. Agency staff were inducted to service policies and were knowledgeable about their role in promoting children's health and wellbeing.

Staff demonstrated commitment to being reflective practitioners and were able to give examples of how they had supported improvement through self-evaluation. For example, room changes in response to how children use the areas; and the development of an intergenerational project with older children and residents of a local care home. Staff were committed to using and building on their knowledge and skills to benefit children. A parent said, "The staff are polite, caring and extremely professional".

Staff were flexible and supported each other to work as a team to benefit children. Staff wellbeing was prioritised and promoted through regular support sessions, the nurturing of relationships and recognition of efforts. This reflected the ethos of the service and mirrored the respectful approach with children. Staff appreciated their workplace and the support they received there.

Continual checking-in between staff took place, allowing them to anticipate what was needed in the rooms which was then actioned. For example, handovers were given to staff returning from lunch to update them on children and general room issues. This kept staff informed of current developments. Senior staff were supporting, guiding and directing all staff aiding their professional development.

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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very Good

How good is our setting?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very Good

How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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