

Dunbeg Primary Pre Five Unit Day Care of Children

Dunbeg School Etive Road Dunbeg OBAN PA37 1QF

Type of inspection: Unannounced

Completed on: 31 January 2023

Service provided by: Argyll and Bute Council

Service no: CS2003014641 Service provider number: SP2003003373



About the service

This service registered with the Care Inspectorate on 1 April 2011. The service provider is Argyll and Bute Council.

Dunbeg Primary Pre Five Unit is a daycare of children service. The service operates from their own modular building and enclosed outdoor space within the grounds of the primary school, in the village of Dunbeg, close to Oban. The service operates during school term times.

1. To provide a care service to a maximum of 41 children not yet attending primary school at any one time.

- no more than 5 are aged 2 years to under 3 years and;

- no more than 36 are aged 3 years to those not yet attending primary school full time.

2. Adult:child ratios will be:

2 to under 3s - 1:5 3 and over - 1:8 if the children attend more than 4 hours per day, or 1:10 if the children attend for less than 4 hours per day.

About the inspection

This was an unannounced inspection, carried out by one early learning and childcare inspector, which took place on 19 January 2023. To prepare for the inspection we reviewed information about the 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:

- observed practice and daily life
- spoke with children using the service
- reviewed documents
- spoke with management and staff
- emailed parents/carers to gather their views and feedback.

Key messages

- Staff knew children well and were developing warm, caring relationships with them to nurture, support their wellbeing and help them feel valued, safe and secure.
- Overall children were having fun and enjoyed seeking out resources that captured their interest, imagination and natural curiosity.
- Staff knew the importance of supporting children to explore their ideas, build on their interests and enjoy a range of experiences outdoors.
- The service worked collaboratively with families and other professionals who may be involved in a child's care and support.
- Staff were flexible, committed and worked well together as a team.
- A positive atmosphere of mutual trust and respect was promoting a happy, secure and supportive environment for children and their families.
- Personal plans should be further developed and streamlined with a focus on detailed support strategies and next steps linked to clearer progression pathways.
- Staff should continue to build as a team on their experience and expertise, to fully meet children's needs through high quality interactions, extending children's thinking and widening their skills to support them in developing their curiosity, creativity and leading on their play and learning.
- Provide children with more opportunities through free play, open ended materials and loose parts play, to promote their curiosity and imagination, their sense of wellbeing, wonder and adventure.
- Management and staff should continue to review and evaluate children's play spaces both indoors and outside with full consideration being given to the experiences for the younger children.
- Quality assurance procedures should be further embedded to include the tracking of staff registrations with the Scottish Social Services Council (SSSC).
- To ensure positive outcomes for children management should monitor and review the deployment of staff in general and over key times.

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. While strengths had a positive impact, key areas need to improve.

Quality indicator 1.1: Nurturing care and support

Staff knew children well and were developing warm, caring relationships with them to nurture, support their wellbeing and help them feel valued, safe and secure. Most children were happy and confident about approaching staff for help, reassurance and to support them with their play.

Parents told us:

"The staff are always friendly and welcoming and have helped [my child] to make friends and develop his/ her social skills."

"The staff do a great job of encouraging independence. I have been informed of any bumps that my [child] has had. I feel the staff know my [child] well and do well in reassuring him/her when needed."

Staff were nurturing and respectful with children's personal care, inviting children to the toilets and supporting them to be changed with sensitivity.

During the inspection we discussed arrangements for the younger children to sleep and rest. Management and staff were in the process of reviewing this to ensure appropriate arrangements were in place for all the children.

Children enjoyed a hot nutritious meal that was appropriately portioned, nicely presented and took account of their individual dietary needs. Children were able to choose where they would like to sit with their friends. We discussed how children would benefit from a more relaxed experience with staff being less task orientated. This would enable staff to further encourage friendly social interactions, developing conversations, as well as opportunities for children to be independent with self service. Children with packed lunches should also be given plates, cutlery and napkins.

Children's personal plans contained relevant core information about children's individual needs and preferences. Staff were recording information to support children's health, welfare and safety needs. To ensure a consistent approach to documenting children's needs and how these will be met, we discussed how recording methods and formats should be further developed and streamlined with a focus on detailed support strategies and next steps linked to clearer progression pathways. (See Area for Improvement 1).

The service communicated with parents in several ways through regular conversations, digital technology, meetings with staff and other professionals who may be involved in a child's care and support. One parent told us "[staff] have built a very good relationship with [my child] and have a good understanding of his/ her needs, I feel the communication with us as parents is brilliant and I find it very easy to talk to them and they are always very helpful and supportive."

We sampled administration of medication forms and storage of medication and found these were in the process of being updated. Management should ensure medication is being monitored and audited in line with current best practice guidance 'Management of Medication in Daycare and Childminding Services'. (See Area for Improvement 2).

Accident and incidents were being recorded and shared with parents. Although management were implementing a weekly audit to track any recurring incidents and identify any areas of action, we have asked that they review their recording methods and formats in relation to this.

Quality indicator 1.3: Play and learning

Overall children were having fun and enjoyed seeking out resources that captured their interest, imagination and natural curiosity. Staff knew the importance of supporting children to explore their ideas, build on their interests and enjoy a range of experiences outdoors. They were promoting numeracy, literacy, and health and wellbeing throughout. A parent commented "It has been great being able to go to nursery stay and plays again. My [child] loves showing me all the toys and books and it's wonderful getting to see him/her interact with the other children."

Staff had identified the importance of further training. This was to support them to carry out observations to develop natural curiosity, a sense of wonder and progression in children's play and learning through promoting independence and offering challenge.

Recent changes had been made to how they were planning and reporting on children's progress. Work was underway to develop planning approaches that were more child centred and responsive to children's needs. For example, 'planning in the moment' and 'the focussed child' with observations and next steps reflecting individual children's development and progress. As we were not yet able to see the impact of these changes on children's experiences and outcomes we would ask that this is monitored closely by management and staff.

Staff demonstrated a sound knowledge and understanding of child development, relevant theory and practice. They recognised as a team, to further support children's play and learning through high quality interactions, they needed to ensure they are extending children's thinking, widening their skills and developing their curiosity and creativity. We discussed how staff could include children more in making informed choices about leading their play and learning. For example, developing strands of learning that respond to individual children's specific needs and interests to further enhance their learning and enrich their experiences. (See Area for Improvement 3).

Areas for improvement

1. To support children's wellbeing, development needs and progress, personal plans should be further developed and streamlined with a focus on detailed support strategies and next steps linked to clearer progression pathways.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which states 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) and 'My care and support meets my needs and is right for me' (HSCS 1.19).

2. To keep children safe and healthy, management should review the storage and recording of medication procedures and ensure medication is audited, in line with current guidance.

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

3. To further support children's play and learning staff should:

- Involve children more in planning and making informed choices about leading their play and learning.

- Continue to build as a team on their experience and expertise, to fully meet children's needs through high quality interactions, extending children's thinking and widening their skills to support them in developing their curiosity, creativity and leading on their play and learning.

This is to ensure care, play and learning is consistent with the Health and Social Care Standards (HSCS) which states that: '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 to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

How good is our setting? 3 - Adequate

We made an evaluation of adequate for this key question. While strengths had a positive impact, key areas need to improve.

Quality indicator 2.2: Children experience high quality facilities

The nursery had a secure door entry system and an arrival and signing in procedure in place. The playroom was clean, well ventilated with plenty of natural light. Furniture was child sized and there were some areas with soft furnishings for relaxation and comfort. Children had space to play in small groups and by themselves. They were able to choose from a range of resources with block play, small world, water and art materials particular favourites.

Staff knew the importance of children being able to enjoy free flow access to outdoors. However, opportunities for children to free flow outside were limited at times as the surface in their outdoor space was frequently too wet and slippery for them to use safely. This had also impacted on children's involvement in the development of their outdoor play space. Following the inspection the local authority acted immediately to rectify this and we were satisfied with the arrangements and plans they had in place to develop and establish a safe and inspiring space for children to play outside. In the interim, we discussed how the woodland area located next to the school could be regularly accessed and used to support children's play experiences, health and wellbeing. (See Area for improvement 1).

At times during our visit we observed that children were distracted and not always engaged or fully absorbed in their play. Staff recognised children needed further opportunities both indoors and outside, to promote their curiosity and imagination, their sense of wellbeing, wonder and adventure through free play, open ended materials and loose parts play. Management and staff should continue to review and evaluate the layout of children's play spaces both indoors and outside with full consideration being given to the experiences for the younger children. (See Area for improvement 1).

Overall, staff demonstrated good practice in infection prevention and control. For example, they modelled good hand hygiene and children were regularly reminded to wash their hands at appropriate times, such as before and after eating and from coming in from outdoors, which encouraged them to develop healthy habits. At present, the service was not routinely wiping down lunch boxes before mealtimes. The head teacher confirmed this would be actioned to further minimise the risk of infection and cross contamination.

During the inspection we also identified porous surfaces underneath the children's toilets that were stained and difficult to clean. The local authority confirmed this was in hand and would be rectified as a matter of urgency.

Areas for improvement

1. To support positive outcomes and improve all the children's play experiences management and staff should:

- Provide children with more opportunities through free play, open ended materials and loose parts play, to promote their curiosity and imagination, their sense of wellbeing, wonder and adventure.

- Continue to review and evaluate the layout of children's play spaces both indoors and outside with full consideration being given to the experiences for the younger children.

This is to ensure care, play and learning is consistent with the Health and Social Care Standards (HSCS) which states that: '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 to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27); and 'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

How good is our leadership?

3 - Adequate

We made an evaluation of adequate for this key question. While strengths had a positive impact, key areas need to improve.

Quality indicator 3.1: Quality assurance and improvement are well led

The service's aims and objective statement set out a clear vision for the setting. Their improvement plan identified appropriate priorities for improvement. For example, emotional wellbeing, creativity and innovation and developing sensory experiences outdoors.

The head teacher recognised that they were on a journey of improvement which would involve staff, families and children. Specific areas of performance such as developing their outdoor play spaces and experiences for children both indoors and outside, would need to improve in order to deliver the best possible experiences and outcomes for children and their families.

Management and staff were committed to the ongoing improvement and development of the service. They understood the importance of maintaining standards, being outcome focussed and consolidating the work already underway, demonstrating their capacity for improvement.

The staff team were committed to their continued professional development. Training and good practice guidance was helping them develop in their roles. They had opportunities to self-evaluate and critically reflect on their work, through staff meetings and day to day discussions. We discussed how this could be strengthened further by considering different ways to incorporate the child's voice through the planning and development of the service.

The head teacher was implementing procedures to monitor and evaluate the service. For example, questionnaires for parents and a monitoring calendar. However, on checking staff registrations with the SSSC we found a member of staff had not been registered within the required timescales. The head teacher acted immediately to rectify this redeploying staff where necessary. To further support and sustain continuous improvement throughout the service quality assurance processes need to be more robust and include a system to monitor and track staff registrations with the SSSC. (See Area for Improvement 1).

Management and staff communicated and engaged regularly with families. Parents were given updates on their child's development and learning through daily conversations, planned consultations and telephone calls. Most parents felt communication was a strength as they had a variety of ways to share information with staff. Some parents suggested that information on their child's progress could also be shared with them online.

Parents told us:

"We find the staff friendly and helpful. We enjoy seeing feedback on what [our child] has been up to."

"The staff are all very approachable and are never too busy to have a quick chat about [our child's] day."

Areas for improvement

1. To further support and sustain continuous improvement throughout the service, the head teacher should embed robust systems that include the tracking of staff registrations with the SSSC, to monitor and evaluate all aspects of their service delivery.

This is to ensure management and leadership is consistent with the Health and Social Care Standards (HSCS) which states that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and '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. While strengths had a positive impact, key areas need to improve.

Quality indicator 4.3: Staff deployment

Staff engaged well in the inspection process and were open and honest. The team were flexible, committed, worked well together and had regular opportunities to meet, talk about their work and discuss children's learning and progress. Staff leadership roles and responsibilities were being developed and they felt well supported by the head teacher. A positive atmosphere of mutual trust and respect was promoting a happy, secure and supportive environment for children and their families.

Parents told us:

"Our experience of Dunbeg Nursery unit has been good, the staff are excellent and my [child] seems to really enjoy it."

"The staff are warm and friendly, my [child] is very fond of them all."

Annual appraisals provided an opportunity for staff to reflect on their role and discuss plans for future learning. We discussed how staff skills and knowledge could be further developed through regular one to one supervision and the implementation of the Scottish Government's National Induction Resource.

Although staffing ratios were being met on the day we inspected more account needed to be taken of the needs of children and the layout of the setting. For example, children became unsettled after lunchtime while staff tidied up due to the increase to noise levels and the restricted access to outdoors, free play and resources. To enable staff to supervise and fully support children's play experiences, health and wellbeing the head teacher should monitor and review the deployment of staff in general and over key times, for example at lunchtimes. (See Area for Improvement 1).

Areas for improvement

1. To ensure positive outcomes for children management should monitor and review the deployment of staff in general and over key times, for example at lunchtimes.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My needs are met by the right number of people' (HSCS 3.15) and 'People have time to support and care for me and to speak with me' (HSCS 3.16).

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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