

Menzieshill Out of School Care Club

Day Care of Children

Tayview Primary School
180 Dickson Avenue
Dundee
DD2 4EH

Telephone: 01382 432 972

Type of inspection:
Unannounced

Completed on:
22 May 2023

Service provided by:
Menzieshill out of school care club

Service provider number:
SP2003000129

Service no:
CS2003000719

About the service

Menzieshill Out of School Care Club is registered to provide a care service to a maximum of 60 children of primary school age. A maximum of 20 children can be cared for in the out of school club room at any one time.

The out of school club operates from within Tayview Primary School in Dundee. The club is based in the community room, with children able to access the adjoining hall for snack, a variety of activities and physical play. There is direct access from the community room to a secure school playground where children can enjoy outdoor activities and fresh air.

About the inspection

This was an unannounced inspection which took place on 18 and 19 May 2023 between 15:00 and 18:00. The inspection was carried out by two inspectors from the Care Inspectorate.

Feedback was given to the manager on 22 May 2023.

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 and eight of their family;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

Key messages

- Children were happy, relaxed and having fun as they took part in a range of activities, which were of interest to them, indoors and outside
- Staff had a caring and kind approach with children and they had built loving and nurturing relationships where children were encouraged and supported to lead their play. Staff had developed positive relationships with families to ensure partnership working and children's needs were supported and met whilst attending the service.
- Children were consulted by staff on many areas of the service and their thoughts, ideas and suggestions were listened to.
- Management and staff should continue to develop a robust quality assurance system, with routine self-evaluation being carried out to support improvements and the continued development of 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?	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, therefore we evaluated this key question as very good.

Quality Indicator 1.1 Nurturing care and support

Children were happy in the club, confident and independent, leading their own play. They were having fun playing alone and with friends. Laughter was heard amongst the children and with staff and we heard children and staff joking with each other. This demonstrated that children felt comfortable, valued and loved. Children were relaxed in their environment and with staff, which demonstrated they felt secure and safe. A parent shared with us "Kids use breakfast club and out of school club during school holidays. They feel totally safe in the care of all the staff and always thoroughly enjoy their time there. It makes me feel better to know that they are so well looked after whilst I am at work. I feel that the club do an absolutely fantastic job".

Very good relationships had been developed between staff and the children. Children and staff chatted with each other and it was evident that positive attachments had been made, which supported children to feel included and listened to. Staff talked of having a very good rapport with children and families, which helped with the sharing and gathering of information to support and meet children's individual needs. Children were encouraged and praised by staff, which helped build confidence, self-esteem and security. Achievements were recognised and celebrated by the children and staff. We saw children who were proud of what they had done or been involved in, such as, playing rounders and hitting the ball so they could run around the bases.

Staff knew the children well and talked of their individual needs, personalities and characters and interests. Staff spoke of how children were supported and cared for and talked of the children developing and progressing while they attended the club. Staff were responsive to children's individual needs, which ensured children had the right support at the right time.

Personal plans were in place, including the children's 'all about me'. These plans contained information to help staff meet the needs of children and support them whilst in their care. Whilst we could see the plans had been updated, we reminded the manager that the plans should be signed and dated by parents when reviewed or updated to show that the most current information was available to staff. A parent told us "This is an excellently run service that provides good care to the children who attend".

The manager talked of introducing different personal plans to gather more detailed information to help staff care for and meet the individual needs of the children. We signposted the manager to best practice guidance 'Guide for Providers on Personal Planning - Early Learning and Childcare' to help with the creation of the new personal plan documents and the information which may be of benefit for staff recording.

Staff supported children very well, giving children space to regulate and checking in with them to offer added support where needed. Children came to staff for cuddles if they wanted them. This caring and nurturing approach showed children they were respected, valued and loved.

Medication was administered after the necessary parental permissions were obtained to ensure detailed information was recorded to keep children safe. Medication was stored securely but with easy access, should it be needed quickly by staff. We suggested children's photographs be attached to the medication

tins for easy identification of children and ensure the correct medication was administered to the right child. The manager was undertaking monthly reviews of the medication and recording this to ensure the management of medication was appropriate and children were safe having medication administered. The manager should ensure that the administration records for long term medication are reviewed at least termly, signed and dated by the parent/carer, ensuring any change in medication administration was identified. We suggested this check be added to the medication audit sheet so that it is carried out during the audits.

Snack was a sociable experience for the children, where they were independent in self-serving their snack and drinks of milk or water. Staff sat with the children as they ate, with different discussions taking place between the children and with staff. This encouraged language development and supported the continued development of social skills. Several children were observed on the first afternoon, walking around the club room and outdoors while they ate crackers and breadsticks. This posed a choking risk to the children if they were bumped into, were hit with a ball or fell over. The staff team should ensure the children sit when eating and drinking, to ensure the children are safe and risks are minimised as they enjoy their snacks and drinks.

Quality Indicator 1.3 Play and learning

Children were fully engaged in their play indoors and outside. Children were playing together, with friendships developing. Older children were observed playing with the younger children and helping them in activities, showing respect and confidence as support was given and received.

Children led their own play, independently accessing where they wanted to play and with what resources. There was free flow play between the club room, hall and outdoors, offering a variety of activities and experiences to meet children's interests. We saw children invite staff into their play, for example, one staff member was sitting chatting with children as they all created with the loom bands and two other staff joined in an energetic game of rounders outdoors during the first visit. Inside we saw a group of children engaged in playing football at the bottom of the large hall, which encouraged active play for children indoors as well as outdoors. An older child provided a younger child with opportunities to score goals and they celebrated their successes, which encouraged the building of confidence, self-esteem and peer support. The second afternoon, children were just as engaged, scooting around on bikes and scooters outside, having some fresh air and physical play whilst indoors a few children enjoyed some monitored time on the PlayStation, working co-operatively to play the games and take turns.

Children's interests were known by staff who encouraged and supported these through various resources and equipment. We heard staff encourage children to think and make suggestions how different play opportunities could be extended, for example, one child asked to have different resources out to extend play in the hall with the small world toys and cars. There were opportunities and experiences which encouraged children's critical thinking, imagination and creativity during the sessions. Literacy and numeracy were encouraged through books available in the tent, discussions with staff about new resources that were being purchased and the measuring of very long loom bands with some estimating of lengths.

Children's suggestions, interests and needs were fully met by staff who had a genuine commitment to ensuring all children found the club to be their 'happy place'. A parent commented "The staff are very good with the children. My daughter loves going to MOOSCC".

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, therefore we evaluated this key question as very good.

Quality Indicator 2.2 Children experience high quality facilities

The staff team had created a welcoming, inclusive environment which was child centred, empowering children to reach their full potential.

The areas used for the out of school club were clean, tidy and welcoming. There was appropriate ventilation, allowing fresh air into the club's space to minimise the spread of infections, whilst warm enough indoors on colder days to ensure children and staff were warmer if they wished. The staff monitored the door and outside gate very well, to ensure children and staff were kept safe, with no unauthorised people entering the premises and children did not leave without their parent/carer.

There was plenty of room for the children to move around unhindered. There was good quality child height furniture which ensured children were comfortable when sitting at the tables, taking part in activities, such as drawing and tabletop games. There was a tent for a quiet space, where children could go to relax, have some quiet time or self-regulate. Children had ample space in the hall to play with toys and equipment that required more room, such as construction toys or putting on dressing up costumes and taking part in imaginary role play. If children wished to lie down on the floor as they played, there was space for this without being stood on or getting in other children's way.

The community room was a welcoming space for the children and a designated space for the club to display information for the children, such as the club rules they had agreed on and snack menus with visuals. Children's artwork was also displayed, encouraging ownership of the environment and providing children with opportunities to revisit their activities, experiences and learning. A display board at the door, ensured information was shared with parents/carers at pick up time, such as holiday club enrolment.

Children had access to a variety of toys, resources and equipment which was age appropriate and of interest to the children attending. We heard a discussion between the manager and a child, where new resources were being discussed, and the child shared their thoughts on new games for the Wii. The toys and games were easily accessible for the children and we saw a few children go into the storage cupboard and choose other toys they wished to have out to continue or extend their play, with staff fully aware of this and nearby should help be needed getting the resources from the shelves.

Staff ensured all risks and hazards were identified and addressed before the children arrived for the session. Written risk assessments were in place for all areas of the service, however, most of these had not been reviewed for some time, for example, the risk assessments for the school pick-ups from nearby schools. This was discussed at the last inspection. The manager and staff team should take time to go through the risk assessments to ensure they are all reviewed and up to date, addressing any risks identified so that children and staff are always kept safe and in all areas of the service. **(See are for improvement 1)**

Children enjoyed the fresh air their play outdoors, which supported their health and wellbeing. There were opportunities to enjoy physical play, be creative and use their imaginations during play outdoors, which encouraged children to be engaged in their play. The manager talked of the plan to introduce small groups accessing the local playpark after school. This was to be introduced after the school holidays and provide different experiences and activities for the children who attended the service after the school day. Children who attend the service during the holidays have the opportunity to access places in the local and wider communities as there is more time to go further afield.

Infection control measures were in place, with children handwashing before having snack and tables wiped

down after snack time, which supported children's health and wellbeing.

Children's information was stored safely in locked filing cabinets and drawers. Staff were fully aware of their responsibilities in keeping information confidential, as appropriate.

Areas for improvement

1. To support children's health, wellbeing and safety, they should be able to play in an environment that has been appropriately risk assessed to minimise any potential hazards. To do this, management and the staff team should, at a minimum, ensure that risk assessments are developed for all environments within the service. These risk assessments should be reviewed regularly and updated as needed to keep children and staff safe.

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

'My environment is secure and safe.' (HSCS 5.19).

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 3.1 Quality assurance and improvement are led well

There were vision, values and aims in place, however, these had been developed many years ago and were to be reviewed with the new intake of children at the start of the new school year in August 2023. The staff team should consult with and involve the children and families in the consideration and agreement of the new vision and values. This would ensure that there is a clear, shared direction for the club, that has been agreed by children, staff and families.

Parents and children were consulted about the service from time to time, for example, feedback was gained from parents regarding the summer holiday programme and the Easter programme. Children were consulted through the children's committee and informal chats, providing their feedback and suggestions to support the evaluation of the service. Formal evaluations were recorded by children for snack foods using a RAG system. This helped staff see what foods were enjoyed most by children and what improvements could be made to the snack foods.

An action plan had been put in place from the last inspection, listing what areas for improvements had been identified. We suggested that the manager date and mark off the priorities as they are developed and addressed, to easily show the work undertaken and priorities that have been completed or carried forward. The staff team should become more familiar with self-evaluation tools, such as 'A quality framework for daycare of children, childminding and school aged childcare' to provide benchmarks to support assessment, which will support the continued development and improvement of the service. A robust quality assurance system should be developed involving the team, children and families, where appropriate. Whilst informal monitoring of service areas was being carried out, formal monitoring and evaluation of all areas should also be carried out. The impact should be recorded and discussed as a staff team to support the improvement agenda within the club and ensure quality outcomes for children. A robust quality assurance system should be embedded within the service, with evaluation and reflection embedded into staff practice. Whilst we could see progress within this area, there was more formal evaluation needed to support a robust and

continuous quality assurance system. We have continued the area of improvement from the previous inspection within this report. **(See area for improvement 1).**

Supervisions and appraisals were carried out for staff by the manager. These could be further developed to gain more information, evaluation and reflection to support staff knowledge, skill and practice. We signposted the manager to The Scottish Social Services Council (SSSC) website for more information about effective supervision styles and recording templates.

Information was shared with families, verbally face to face, through newsletters and the private Facebook page. These methods allowed for effective communication, the sharing of information relevant to the children and service and the gathering of feedback to support the continued development of the service.

Policies and procedures which underpinned the service and supported staff practice were in place. Some policies and procedures needed to be reviewed and updated to ensure they followed best practice, for example, missing child policy and the complaints policy. The manager said that a review of all policies and procedures was to take place shortly. Policies and procedures should be reviewed regularly to ensure they remain relevant to the service and continue to follow best practice.

Areas for improvement

1. To improve practice and outcomes for children, management and staff should formally evaluate the service and develop a continuous quality assurance system to support the development of the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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?

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 4.3 Staff deployment

Staff were kind, caring and nurturing. They knew children and families well and worked in partnership with parents to support and meet children's individual needs. Staff were enthusiastic and committed to the service and had the children at the centre of their work. Staff were caring and consistent in their approaches with children, ensuring continuity and quality care.

Staff deployment was very good, supporting very good supervision of children, while encouraging children to be independent and lead their play. Staff communicated well, face to face and with walkie talkies to ensure effective communication with each other, when a task took them away from the area. Children's care and support was not impacted with staff moving away from areas.

The manager talked with staff regularly to minimise unplanned absences. Staff wellbeing was a high priority within the service and the sharing of relevant and necessary information about children's needs,

staffing, the daily running of the service and continued improvement, kept staff informed, included and motivated.

Staff had participated in training since the last inspection, such as first aid, and there were plans for the staff team to complete core training and other identified individualised training this year, to enhance their knowledge, skills and practice and to support high quality experiences and outcomes for children.

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

To protect and keep children safe, the management team should ensure that the administration of medication records are fully completed, with three monthly reviews being undertaken and full audits carried out as detailed in best practice guidance.

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)

This area for improvement was made on 23 September 2022.

Action taken since then

The administration records were fully completed and the manager was undertaking monthly checks as part of the audits to ensure medication was in date and all consents in place, signed and dated. We reminded the manager to ensure long term medication records are reviewed at least three monthly.

Previous area for improvement 2

To promote a safe, sociable snack experience, management and staff should review the food and drinks provided and the management of snack. Children should be encouraged and supported to be independent and have access to healthy food and drink options.

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

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning.' (HSCS 1.33)

This area for improvement was made on 23 September 2022.

Action taken since then

We saw children self serve themselves which was encouraging independence and confidence. Children had been involved in the planning of the snack menu which encouraged healthy snack options.

Previous area for improvement 3

To improve practice and outcomes for children, management and staff should formally evaluate the service, put in place an improvement plan and develop a continuous quality assurance system to support the development of the service.

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

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

This area for improvement was made on 23 September 2022.

Action taken since then

Whilst more evaluation was taking place within the service, management and staff needed to formally evaluate the service and identify further key priorities to support the continued development of the service. Through embedding regular evaluation and reflection, a robust quality assurance system would be supported within the service.

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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