

Gargunnock Playgroup Day Care of Children

Gargunnock Community Centre
Leckie Road
Gargunnock
FK8 3BJ

Telephone: 01786 860 287

Type of inspection:
Unannounced

Completed on:
15 June 2023

Service provided by:
The Committee of Gargunnock
Playgroup

Service provider number:
SP2003001140

Service no:
CS2003005441

About the service

Gargunnock Playgroup is a daycare of children service. It is located within the community centre in the rural village of Gargunnock. A large, enclosed garden area to the side of the building offers children free flow access to outdoor play. The indoor playroom provides ample space for children to play and rest. A separate kitchen area is available for the preparation of snacks and baking activities. Children's toilets are accessed, with supervision, outwith the playroom.

The service is registered to provide care for a maximum of 18 children aged from two years to those not yet attending primary school. Of these, a maximum of five children may be between the age of two years and two years and six months.

About the inspection

This was an unannounced inspection which took place on Monday 12 June 2023 and Thursday 15 June 2023 between 09:15 and 12:30. 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 in the service
- reviewed digital responses from five families
- spoke with staff and management
- observed practice and interactions with children
- reviewed documents.

Key messages

- Children had fun and enjoyed exciting experiences as they explored their local community.
- Children benefitted from a clean, organised and well maintained setting.
- Staff and parent helpers knew children well and positive, nurturing relationships had been established.
- The service should develop personal plans for children which should be reviewed at least every six months.
- Observations of children's learning should be recorded.
- The views of all stakeholders should be used to inform future planning and development of the service.
- Self-evaluation and quality assurance procedures should be developed.

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? | 4 - Good |
| 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 evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality Indicator 1.1 - Nurturing care and support

The warm, caring and nurturing approaches experienced by children meant they were confident and happy as their wellbeing was supported. Staff had developed positive relationships with children and knew them well. Parents told us they were very happy with the care their children experienced. One parent told us "[staff] are lovely with the children and my child has really bonded with them." We observed staff responding to children's needs and requests, and supporting them appropriately. This meant that children felt valued and respected as individuals as their needs were being met.

Healthy snacks were prepared and provided by the parent helper on duty each session. The manager explained that all parent helpers had a copy of best practice guidance to ensure choices were nutritious. Snack time was a positive social experience for children where they had time to chat with friends and relax. We discussed ways to enhance this experience further with the service. For example, involving children in the preparation of snack. This would provide opportunities for them to develop important life skills, such as cutting and peeling fruit. We also suggested that children could be involved in developing a snack menu. This would support them to have more choice in the foods they ate. It would also provide children with further opportunities to learn about the importance of healthy eating. Throughout the session children had access to fresh water and were encouraged to remain hydrated.

Personal plans had not been completed for children. We could see that the new manager had plans and templates for personal planning. These had not yet been implemented. (See area for improvement 1).

At the time of inspection no children required medication. We were satisfied that appropriate policies were in place to safely administer, record and share information with families when needed.

Quality Indicator 1.3 - Play and learning

Children were confident and had fun as they actively led their play and learning. There was a balance of spontaneous and planned experiences that promoted children's choice and independence. Children told us that they liked coming to playgroup and said that they "liked playing with friends." Free flow access to the enclosed garden area provided children with opportunities to explore and develop their physical skills. For example, we observed children being supported to climb trees. Skilful staff used effective questioning to encourage children to consider the risks and think about their capabilities. This meant children were developing an awareness of how to stay safe and building confidence in their abilities. As a result their self-esteem was growing as they celebrated their achievements.

Play and learning experiences could be enhanced further to support development of children's numeracy and literacy skills. Access to more open ended resources would further promote and develop children's natural curiosity and problem solving skills. As a result children would benefit from experiences where learning opportunities were appropriately challenging, in a fun and exciting way.

Children's experiences were shared with families informally, through conversations at pick up time, and

photographs of experiences. At the time of inspection, observations of children's learning were not recorded. The service told us how they planned to begin recording these formally, using an online platform. We discussed the importance of sourcing and providing staff with the necessary technology. This would support them to ensure all information and photographs were stored securely. The manager also shared their intention to develop floorbooks with children, to record and evaluate experiences. This would provide children with opportunities to reach their full potential as they revisit and share their learning with others. (See area for improvement 2).

Areas for improvement

1. To support children's overall wellbeing the service should develop children's personal plans. These should include the views of children and families. They should be reviewed and signed by families at least on a six monthly basis.

This is to ensure I experience high quality care and support that is right for me and is consistent with the Health and Social Care Standards (HSCS) which state that 'My personal 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. To ensure children are making good progress and identify where additional supports may be required the service should record and share observations of children's learning. These should highlight children's achievements and their proposed next steps.

This is to ensure I experience high quality care and support that is right for me and is consistent with the Health and Social Care Standards (HSCS) which state that 'I am supported to achieve my potential in education.' (HSCS 1.27)

How good is our setting?

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 2.2 - Children experience high quality facilities

The service was delivered in the local community centre. The playroom was thoughtfully set up before each session to provide routine and familiarity for children and families. Consideration was given to areas for children to play, rest and eat. For example, rugs and a pop-up tent were used to provide somewhere soft and cosy for children to look at books and explore activities. The indoor playroom was spacious with lots of natural light and ventilation. As a result, children were made to feel welcome and valued.

Children had free flow access to the large, enclosed outdoor area throughout the session. They enjoyed using their imagination to play and explore nature. We observed children working together using water and mud to make a "chocolate lake." They used sticks to build a dam and excitedly told us "it's to stop it flooding." Staff recognised the positive impact being outdoors had on children's wellbeing. Good use was also made of the local community as they regularly visited the pond to check on the tadpoles. Staff were responsive to children's interests and ideas as they went in search of cows and sheep. This meant that children's play and learning opportunities were enhanced through strong connections to their community.

Children benefitted from a clean, organised and well maintained setting. Infection prevention and control routines were embedded and supported a safe environment. Handwashing at key times and regular

cleaning procedures meant that the spread of infection was mostly kept to a minimum. We discussed using warm, running water and soap for children to wash their hands, particularly before snack, on outings. This would further enhance routines and ensure they were robust.

Risk assessments ensured that children's safety was promoted as potential risks had been minimised. The manager was developing these further by considering risky play and the benefits of this for children. We discussed the potential learning opportunities and positive impact for children by involving them in this process.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality Indicator 3.1 - Quality assurance and improvements are led well

The manager and provider had a shared vision. This was to offer children fun and exciting experiences which supported them to feel part of their local community. Parents and family members told us that being part of village life was a real positive in the service provided. One parent told us how it supported them, "The convenience of having it in the village- there is a lack of pre-school child care facilities in Gargunnock." They went on to say that the service supported children by, "Allowing the kids sometime away from their parents and introducing gentle goodbyes at drop-off and excited hellos at pick-up." The aims and objectives of the playgroup were under review by the committee and were due to be discussed at their next meeting.

The manager was relatively new to the playgroup and was beginning to update and review self-evaluation systems. Parents were very happy with improvements made by the new manager. They told us "[The manager] has been a wonderful asset and I've seen a great improvement since her appointment." Another parent said, "[The manager] is clearly excellent and we're lucky to have her." We could see that positive relationships were being established. The manager shared their plans to develop floorbooks to record children's experiences. This would provide opportunities for children and staff to reflect together and record their evaluations. To ensure children benefit from a service that is reflective and continually improving, robust quality assurance procedures should also be developed. (See area for improvement 1).

Feedback from families was gathered informally at drop off and pick up times. We suggested finding more formal ways to gather and record the views of stakeholders. For example, questionnaires for children and families. This would ensure that everyone's views were included and would encourage them to feel involved and valued. We discussed how these views should be considered as a starting point, along with staff reflections, for future improvement planning. This would ensure children's needs were being fully met and would support them to reach their full potential. (See area for improvement 2).

Areas for improvement

1. Robust quality assurance procedures should be developed to ensure children benefit from a culture of reflective and continuous improvement.

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).

2. To ensure the service delivers high quality care and support the views of stakeholders should be meaningfully represented and used as a starting point for future improvements.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve.' (HSCS 4.8).

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Quality Indicator 4.3 - Staff deployment

Children benefitted from a staff team who were enthusiastic and led by an experienced and skilled manager. We reminded the service of the importance of ensuring all staff received training and were registered with Scottish Social Services Council. (See area for improvement 1).

A rota of parent helpers supported staff and children during each session. Staff and helpers communicated and worked well together. This ensured children were safe, having fun and were well supported throughout the session. They knew children well and responded compassionately to children's needs and offered comfort and reassurance when needed. A nurturing, respectful atmosphere had been created which promoted positive and secure attachments for children. As a result children's emotional wellbeing was supported and their needs were being met by staff who knew them well.

The service had developed an induction process for new members of staff. We highlighted the Scottish Government document: Early Learning and Childcare National Induction Resource. We discussed how this could be used as a basis for future staff induction.

The manager was pro-active in their approach and had made plans to work in partnership with other playgroup settings. This would provide opportunities for sharing best practice and engaging in professional discussions. As a result children benefitted from a manager and staff who were motivated and committed.

Areas for improvement

1. To provide children and families with confidence in the people who support and care for them the provider should ensure all staff have access to relevant training and are registered with Scottish Social Services Council (SSSC).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that '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. (HSCS 3.14).

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? | 4 - Good |
| 2.2 Children experience high quality facilities | 4 - Good |
| 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 |

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.