

Southside and Central Out of School Hours - SCOOSH Day Care of Children

Nelson Hall
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Type of inspection:
Unannounced

Completed on:
22 June 2023

Service provided by:
Southside and Central Out of School
Hours a Scottish Charitable
Incorporated Organisation

Service provider number:
SP2018013094

Service no:
CS2018365626

About the service

Southside Out of School Hours (SCOOSH) operates from Nelson Hall community centre in Edinburgh. Children have access to the ground floor of the building which consists of a large main hall space, a dining area and toilet facilities. The children also have direct access to an outdoor enclosed garden space. The service is close to local schools, shops and community green spaces.

The service is registered to provide a care service to a maximum of 100 school aged children up to the end of year two of secondary school.

About the inspection

This was an unannounced inspection which took place on Tuesday 20 June between 14:30 and 17:30 and Wednesday 21 June 2023 between 14:15 and 17:00. The inspection was carried out by two inspectors 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 to staff and management
- received written feedback from 19 parents
- observed practice and daily life
- reviewed documents.

Feedback was given to the service on Friday 22 June.

Key messages

- Staff were welcoming to children and parents, which resulted in kind and positive relationships.
- All children had a personal plan, which included the GIRFEC wellbeing indicators to plan for children's overall wellbeing, care and safety.
- Children were having fun, and were fully engaged in play activities of their choice.
- Staff were confident in implementing safety measures when they collected children from school, to keep them safe.
- Staff had worked hard to develop their skills and knowledge of self-evaluation and planning for improvement.
- Quality assurance systems were in place to help the service ensure they provided high quality childcare.
- Staff should develop children floor books to plan and evaluate play and learning.

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

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|--|----------|
| How good is our care, play and learning? | 4 - Good |
| How good is our setting? | 4 - Good |
| How good is our leadership? | 4 - Good |
| How good is our staff team? | 4 - Good |

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

How good is our care, play and learning?

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: 1.1 Nurturing care and support.

Children were happy, engaged, and confident in the setting. Interactions with staff were kind, caring and nurturing. This helped children feel safe and secure. There was a calm and respectful atmosphere and children had clearly built positive relationships with each other and staff. They told us they enjoyed the club, and one child told us "It's the best place in the whole world". Parents told us, "This is a great resource and the fact my (child) would love to go there five days a week is testament to the great job that they do".

Staff were welcoming and responsive to children when they collected them from school. Good relationships with school staff supported the transition and appropriate checks were carried out prior to leaving the school grounds. The walk back to the setting was well planned and staff chatted with children about their day's events. Children were respectful and listened to staff. They clearly knew the routine and in keeping themselves safe.

Children's overall wellbeing was supported through information gathered in personal plans. These helped meet their health and care needs and included the GIRFEC wellbeing indicators. Children were encouraged to contribute to their plans by sharing their likes and dislikes. Children with additional support needs had care plans in place and staff were confident in discussing their needs. However not all had a record of next steps to inform reviews. These should be clearly detailed to ensure that children's needs are appropriately supported to enhance learning and wellbeing.

The service had systems in place to ensure children who required medication were kept safe. Staff were confident and had a good understanding of how to administer medication, including emergency medication for children. This meant that their health care needs were met.

Children enjoyed a sociable snack time and chatted together around the tables. The tables were inviting and presented well with centre pieces made by the children. Children were familiar with the routine and enjoyed making fruit kebabs from a range of fruit on offer. We suggested children could take more responsibility in the preparation, serving and clearing of snack. This would help their choices and develop life skills.

Quality Indicator: 1.3 Play and learning

Children were happy and having fun. They played independently and in small groups, enjoying a range of activities. They were given choice and freedom and played well together, respecting others ideas. Activities included chess, lego, construction toys and "taking a New York cab to Hollywood".

An art and craft area was well used and children used a range of resources including cardboard boxes, pens, ribbons, and string to create flags and hot air balloons. Staff ensured that resources were replenished and made available to support the children's creativity.

Planning approaches were mainly adult led, however were in the process of review. We discussed with staff

they should evaluate planned activities and use this information to plan future play experiences. This would enhance children's learning experiences, based on their interests. We suggested using floor books to capture children's interests and experiences. For example, a recent theme of countries which had included contributions from children and their families.

Staff had identified that there was a need to introduce more natural and open-ended play materials. For example, The mud kitchen area outside lacked opportunity for children's curiosity and imagination. We discussed the addition of natural resources including sand, soil, leaves and stones to encourage creativity. We sign posted them to the loose parts tool kit that can be accessed on the Care Inspectorate 'Hub'.

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.

Children benefited from a welcoming, bright, and airy environment. The setting was well planned, and children had lots of space to freely move around indoors and outdoors. Play spaces reflected children's interests and provided a range of opportunities for active play and learning. Children were respectful of spaces and responded to staff when asked to tidy away activities.

To keep children safe there was a door security system in place to ensure that members of the public could not access the building independently. The setting and equipment were safe, secure, and well-maintained. Risk assessments and checks taken by staff helped to ensure a safe environment for children both indoors and outdoors. Good communication between staff meant that children were always accounted for. They had effective systems in place for signing children in and out of the setting and ensure that children were collected by an appropriate adult.

Children were supported to be healthy and safe through effective infection prevention and control routines. The environment was well ventilated, hand washing was embedded in practice, and regular cleaning took place. Staff were being respectful and protecting children by maintaining a clean and hygienic environment.

Resources were easily accessible to children and the layout of the playroom had been well considered. It provided a variety of areas to enjoy different types of play with space for floor play and use of tables. Children had the opportunity to relax and enjoy books in a quiet area set up as a cosy corner. This resulted in children having the opportunity to make choices about how they spend their time.

Children's health and wellbeing was supported through regular exercise and fresh air. We saw children having fun outdoors playing with hula hoops, basketball, and balls. Staff encouraged friendship groups as they played. This helped to support children's confidence and give them a sense of belonging.

Information about children was kept securely. Sensitive information was only shared with those who needed it to meet children's needs. As a result, children's information was protected, and storage complied with relevant best practice.

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 improvement are well led.

The manager demonstrated their enthusiasm and motivation to focus on improvements and positive outcomes for children, supported by the management team. Staff told us they felt very supported and as a result were happy to be at their work. High staff morale impacted strongly on children's experiences and staff were clearly committed to providing a quality service. Parents told us staff were, "Very accommodating, friendly, approachable staff."

Communication with parents was good and staff spoke with parents each day when children were collected. Email updates, newsletters and photographs were used to include parents. Staff told us they were trying to involve parents in further ways including the club's facebook page.

Children told us they could put ideas in the "recommendation book" of what they would like to do. However, we found that not all children were aware of this or the club rules. We discussed with staff that these should be reviewed termly with children. This would allow all children the opportunity to influence improvements and be more meaningfully involved in evaluating the club.

Team meetings took place every month and these provided an opportunity for staff to discuss a range of topics, including sharing information about children and areas for development within the service. The team had begun to use the Care Inspectorate document, 'A quality framework for daycare of children, childminding and school-aged childcare' to identify areas of good practice and areas for development.

The service had worked hard to put quality assurance and monitoring processes and systems into place since the previous inspection including medication systems and personal plans. Staff were included in reflecting on the quality of the service and planning for improvement. They told us that they had worked as a team to decide on priorities for improvement and were tasked with leading planned improvements. One example included, developing newsletters for parents. This team approach meant that there was a shared understanding of service improvements and that children benefited from a culture of continuous improvement.

How good is our staff team?

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 4.3: Staff deployment

Staff worked well together to create a positive and welcoming environment for children and families. All parents told us they were confident that staff had the appropriate skills, knowledge, and experience to care for their children and one parent told us, "I think that scoosh is really well organised and the staff are very professional."

The staff team was consistent, and this provided a continuity of care for children and families. Staff communicated well with each other when leaving spaces, which ensured that children's safety was

maintained. They were flexible in their approach to follow children's interests and requests in play, swapping roles and areas in order support this. This meant that children were well-supervised.

We asked the management team to review the deployment of staff at snacktime, as many children were keen to have snack as soon as they arrived at the club. They told us they were always hungry after school. Only one member of staff was supporting this area on the first day of inspection. After discussion with the management team staff were deployed into the area on the second day. We saw staff sitting with children engaged in discussions about the day's events. This helped to ensure positive experiences for children.

We found the service to be appropriately staffed to meet the needs of the children and service. Safe recruitment procedures had been followed and staff were registered with the appropriate professional body, The Scottish Social Services Council (SSSC).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 31 October 2022, the provider must ensure that children's health, welfare and safety needs are met. The provider must ensure that each child has a personal plan in place. Staff should ensure that the care needs set out in children's personal plans are followed accurately by staff. This will help keep children safe and meet their health and wellbeing needs.

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

- a) ensure that every child has a personal plan in place
- b) ensure staff have accurate information on each child's needs
- c) ensure staff meet those needs by using information and instructions from parents
- d) ensure 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 requirement was made on 27 July 2022.

Action taken on previous requirement

All children had a completed Personal Plan. These included relevant information to support children's health and care needs. They were reviewed with parents on a six monthly basis or more regularly in response to relevant changes.

Met - within timescales

Requirement 2

By 31 August 2022, the provider must ensure that children's medical needs are met to keep them safe and healthy. To do this, the provider must, at a minimum:

- a) ensure that written information relating to children's medication is recorded with clear instructions and permission given by parents
- b) ensure information held relating to children's health care needs and/or medication is reviewed by parents when required and as a minimum once per term
- c) instructions on the actions staff should take to support a child if they became unwell while in the care of staff
- d) clear procedures to sign medication in and out of the service
- e) safe storage of medication
- f) ensure staff are knowledgeable about children's medical needs and where medication is stored

This requirement was made on 27 July 2022.

Action taken on previous requirement

The service had created a medical overview sheet that detailed children's medications stored on site. These were checked and signed off on a monthly basis. Each child has an individual medication checklist in their record that detailed each separate medication and ensures it is in date and has been prescribed. If there is any actions to be taken then this is written on the sheet and signed off by the staff member. All staff had been given information about the children's medication and medical needs.

Met - within timescales

Requirement 3

By 23 September 2022, the provider must ensure that children have the right care at the right time. The provider must proactively work with other professionals, outside agencies and families to identify appropriate strategies of support. All staff should ensure that these are consistently implemented. The impact of these strategies must be recorded and regularly evaluated to ensure that they are having a positive impact and meeting children's needs.

This requirement was made on 27 July 2022.

Action taken on previous requirement

The service had introduced an additional support needs care plan. This includes information directly from parents about their child's specific needs and any strategies that they use in the child's home life or within the school environment. This will be reviewed by staff and parents to ensure that the strategies meet the child's changing needs.

Met - within timescales

Requirement 4

By 25 November 2022, to ensure that children and parents experience a service which promotes children's health and wellbeing through high quality care, play and learning experiences, the provider must ensure that there is a culture of continuous improvement. To do this, the provider must, as a minimum:

- a) develop and implement an improvement plan for the service.

- b) ensure staff practice and children's experiences are monitored and consistent with best practice and national guidance
- c) build opportunities for professional discussion and feedback to improve staff and service performance
- d) develop systematic and rigorous procedures for quality assurance including self-evaluation, auditing and monitoring of record keeping across all aspects of the service
- e) ensure staff practice and how they support children's play is in line with best practice, for example ensuring a well-set up and safe play space with core resources
- f) ensure that staff role model good practice in all aspects of the service to promote a culture where children experience protection, love, warmth and nurturing care.

This requirement was made on 27 July 2022.

Action taken on previous requirement

The service have developed an improvement plan for the service based on the requirements set out in this report. A briefing for staff has been introduced at the start and end of the sessions to allow staff to discuss any issues that may have arose and to feedback on their activities. Self evaluation diaries have been introduced for staff to reflect on how activities and children's interests and share these with the team at weekly staff meetings. Children's views and opinions are informally through chats with staff during activities. Parents/Carers will be asked to complete an annual satisfaction survey and further ways to gather feedback will be developed throughout the year.

Met - within timescales

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

Children are provided with well organised and social experiences at meal times. The manager and staff should ensure that the staff team have a shared understanding of the value of mealtime experiences for children. This understanding and improved practice should take into account the good practice guidance Setting the Table (NHS Scotland) and Food Matters (Care Inspectorate).

This area for improvement was made on 27 July 2022.

Action taken since then

A snack menu has been introduced in consultation with the children. The children will have a set period of time where snack will be available and they will be prompted at the end of snack's serving time if they have not had anything.

Previous area for improvement 2

Outcomes for children should be improved through development of staff engagement and planning that broadens opportunities and supports children to take the lead in their own play and learning.

This area for improvement was made on 27 July 2022.

Action taken since then

Information from children about the activities that they wish to do has been developed through a recommendation book.

Previous area for improvement 3

Children should be able to influence when they play outdoors and have access to a well-resourced natural play and learning environment. The provider should ensure that staff understand the importance of outdoor play for children's health and wellbeing. All staff should ensure that children have sufficient access and time spent outdoors which contributes to their overall development, health, wellbeing and happiness.

This area for improvement was made on 27 July 2022.

Action taken since then

Children can freely flow between indoor and outdoor spaces. If more children move into the outdoor environment then staff from the hall move outdoors to support the existing staff to ensure greater access to the outdoors.

Previous area for improvement 4

To support children to extend and build on their own play and current interests indoors and outside, the staff team should ensure children have consistent free access to a range of resources that support challenge and curiosity across all age groups.

This area for improvement was made on 27 July 2022.

Action taken since then

A children's craft table has been introduced which gives access to a variety of different resources on a daily basis. This gives children greater choice when doing arts and crafts, allowing children to be creative using the available resources.

Information has been gathered from children's personal plans to give an insight into their current likes and dislikes, and areas they would like to improve on. This information will be used to structure the activities and resources that are available to the children.

Previous area for improvement 5

The provider should ensure policies and procedures are up to date and effective. These should result in high-quality staff practice. Staff should know and follow procedures to promote children's health, safety and wellbeing at all times. Parents should be informed of policies and procedures and know what to expect from the service provided. This will support children to thrive in the service and meet their potential.

This area for improvement was made on 27 July 2022.

Action taken since then

Policies and procedures have been reviewed and updated and shared with parents.

Previous area for improvement 6

Children are cared for by trained, skilled, competent staff that are employed to support positive outcomes for children and families. The service should have a range of safer recruitment and selection practices in

place. In order to achieve this the provider should ensure that they follow best practice and guidance set out in the Care Inspectorate, 'Safer Recruitment, Through Better Recruitment' (2016).

This area for improvement was made on 27 July 2022.

Action taken since then

The service have processes in place to ensure that safer recruitment is adhered to.

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

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|--|----------|
| How good is our care, play and learning? | 4 - Good |
| 1.1 Nurturing care and support | 4 - Good |
| 1.3 Play and learning | 4 - Good |
| How good is our setting? | 4 - Good |
| 2.2 Children experience high quality facilities | 4 - 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? | 4 - Good |
| 4.3 Staff deployment | 4 - Good |

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