

Kirktonholme @ Canniesburn Day Care of Children

Canniesburn Lodge 10 Switchback Road Bearsden Glasgow G61 1QN

Telephone: 01419 429 221

Type of inspection: Unannounced

Completed on: 17 August 2023

Service provided by: Charlotte and Edward Kelly , a partnership

Service no: CS2011286071 Service provider number: SP2011982135



About the service

Kirktonholme @ Canniesburn is provided by Charlotte and Edward Kelly, a partnership.

The early learning and childcare centre is located in the Canniesburn area of Bearsden, Glasgow. The centre operates from a converted lodge and purpose-built annex within the enclosed grounds and outdoor play areas.

The service is registered to provide a care service to a maximum of 92 children as follows:

Main building: 21 children 0 - under 2 years 21 children 2 - under 3 years.

New building:

32 children 3 years to those not yet at primary school of which a maximum of 10 children from the age of 2 years only.

When using the extended part of the playroom a maximum of 50 children 3 years to those not yet at primary school only.

About the inspection

This was a full unannounced inspection which took place on 16 and 17 August 2023. 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 and 20 of their family members
- spoke with staff and management
- · observed practice and daily life
- reviewed documents.

Key messages

- Staff were very responsive, caring and committed to successfully supporting children. Children experienced warm and nurturing approaches to support their wellbeing.
- There were good quality play, learning and development opportunities for children.
- The management and staff team were committed to delivering a quality service for children and families.
- Plans were in place to deploy staff across the nursery based on knowledge, expertise and experience to fully support children and ensure that quality care and learning experiences were in place.

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?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
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? 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.

Staff were very responsive, caring and committed to successfully supporting children. Children experienced warm and nurturing approaches to support their wellbeing. We observed good relationships between staff and children. Most staff engaged effectively with children using appropriate language and questioning to extend discussion and learning. Less experienced staff needed support to develop their skills in language and communication. We saw most children making choices and leading their play at their own pace. Staff checked in with children, praising their achievements. These approaches helped children to feel secure and settled in the service. Older children confidently engaged with us telling us about their nursery and favourite activities. We observed supportive friendships between children which gave them a sense of belonging and positively impacted on wellbeing.

The senior management team were supporting staff to build relationships with parents. Staff were taking time to chat with parents, sharing and exchanging information about their child's day. This helped them to understand how their children were being supported to learn and develop. The management team shared their intentions to continue to improve communication with parents, involving them in decisions about their children's care and development.

Children's wellbeing was supported through the use of personal planning. Staff had gathered information about children which was contained in personal care plans. The majority of care plans had not been updated recently due to the change in management and staffing levels. Some care plans had been reviewed to ensure they reflected children's individual preferences, likes and dislikes. Similarly, children's learning journals had not been updated with information about children's learning and development. This meant that next steps for learning for children were not properly reflected. Senior management were well aware of this and planned to support staff to update plans and journals.

We observed lunch for all children. This was a pleasant, sociable experience. Children were not rushed and enjoyed eating together. Children in the under three unit were encouraged to pour their own water from large flasks. We raised an issue about the use of these, suggesting that small water jugs could be used to promote independence and help children to practice a different skill. We also discussed the use of higher level chairs at one lunch table as it was difficult for children to manage. We asked the manager to review the time it took to serve lunch and the participation of staff to support children. She confirmed that the issues highlighted had already been identified and an action plan was in place to address them. The management team were supporting staff at lunchtime to ensure children had a positive experience. Older children had a 'rolling' lunch which allowed them to enjoy uninterrupted play until they were ready to eat. Children were developing their independence by pouring their own drinks and clearing away their plates after lunch.

Staff recognised the importance of sleep to enhance children's wellbeing but needed support to implement sleep routines in response to children's needs. The manager was aware of this and there were plans to review safe sleep guidance for children.

The policy and procedure for administration of medication was satisfactory. The manager intended to update paperwork and add information such as date of birth and photograph to help staff clearly identify children when administering medication.

A child protection policy and procedures were in place. There was a designated child protection officer and staff had received training. This ensured they knew how to respond to concerns about a child.

Parents' comments included:

"When new staff arrive a better introduction to parents even just a message though the app welcoming them to the nursery and letting parents know who they are"

"Staff are knowledgeable, caring and nice. My child is always happy to go to nursery."

Quality Indicator 1.3: Play and Learning.

We observed good quality play, learning and development opportunities for children. A variety of resources were available to children both indoors and outdoors. Some learning provocations were set up to spark children's interest, stimulate thoughts and ideas and encourage questioning, for example, loose parts play. To promote language and literacy, books were available indoors and outdoors. Staff read with children on one to one and small groups which supported their enjoyment of books and language development. Chalk, sand and a variety of pencils and crayons were available which supported mark making.

Most children were empowered to lead their play and learning through the support and interactions of staff. Children played independently and in small groups. We saw them relaxing with friends, playing imaginatively and enjoying activities outdoors.

Children were happy in their play. We noted that staff interactions and engagement with younger children could be strengthened to support curiosity and sharing discoveries together. This would help to inject more fun and excitement and encourage children to explore and investigate. Older children enjoyed activities such as climbing trees, examining and comparing slugs in the garden, playing hide and seek. Children benefitted from open ended, loose parts play which promoted their imagination and creativity. Staff supported children well, helping them to develop skills and build confidence.

The manager shared her intention to introduce 'in the moment planning'. This is an effective way of supporting child led learning, allowing children the freedom to explore their own interests. Children benefit from active engagement which helps to drive learning forward. We observed some good practice in relation to this in the nursery where staff implemented national guidance such as 'realising the ambition'. We discussed with the manager the need to support all staff to develop their knowledge and understanding of play pedagogy to support high quality play.

Parents' comments included:

"The nursery plan activities well and they communicate well with parents through the app about what your child has been doing today and how this fits with your child's learning and developmental needs"

"The play-based activities are great. The outdoor space enhances this and I feel the children massively benefit from having the outdoor spaces at Canniesburn"

"More organisation of activities depending on children's ages and active engagement of children in ageappropriate activities"

"We are overall happy but we would like for her to go on more trips to the woods as they said they would do that when they joined."

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 experienced a setting which was clean, inviting and welcoming. The play areas benefitted from natural light and ventilation. Children had lots of space to freely move around indoors and outdoors. Furniture and resources were of a good standard and organised to promote free flow play, for example, the home area for younger children was well resourced and positioned near to a bright full length window. It provided an attractive area for children to explore. Soft furnishings such as cushions, rugs and plants created a homely feel and helped children to relax. Sensory materials supported children's curiosity. Small world resources such as cars, dinosaurs and wooden blocks were easily accessible for children.

The outdoor areas for younger children were attractively presented. Senior management shared their intentions to further develop these areas.

We saw staff helping children to use resources in their own way to develop their play and match their own interests and intentions. However, we highlighted to senior management some issues with provision of resources, for example, baskets which should have offered loose parts to children were empty and water bowls were also empty. This was immediately addressed by staff, demonstrating their understanding of providing a well resourced environment to support play.

The design of the indoor/outdoor environment for children aged 3-5 years was a key strength within the service offering children a range of quality experiences. Children had the freedom to run around, develop their physical skills, be creative and enjoy quieter moments indoors.

The availability of open-ended resources enabled children to engage their imaginations, develop life skills and spark curiosity. As a result, children were motivated, engaged, confident and having fun.

The management team were committed to involving staff in planning and decision making about the play environment to ensure the best outcomes for children.

Children could access toilet facilities within the playrooms and also outdoors in the 3-5 play area. Where children needed support, this was carried out in a designated changing area meaning children's dignity and personal preferences were respected. We discussed some safety/infection control issues with senior management, for example, storage of a ladder and toilet brushes in children's toilets, toilet door wedged open.

Senior management shared their discussions about possible change to the broader age bands younger children were accommodated within. Narrowing age bands would help staff to meet the more specific developmental needs of younger children. With this in mind we discussed nappy changing facilities and recommended that new guidance is followed in this respect (see area for improvement 1).

We observed infection control practices and found that these were in accordance with current infection control guidance. We saw staff and children carefully washing hands and staff cleaning surfaces and resources. This meant that children were kept safe and well.

There were playroom quality assurance checklists and risk assessments in place to monitor areas and ensure safety and security for children. Staff worked well together to identify and minimise risk to children within the setting, both indoors and outdoors. This meant that children's activities were not compromised and they were supported to enjoy challenging, fun experiences.

Accidents and incidents records were completed and shared with parents. Monthly audits were carefully completed to identify any areas of potential risk or concern.

Children's information was stored securely within the office and children were monitored by staff when using IT equipment. Children's personal information was safe and protected. The premises and resources and equipment were well maintained.

Parents' comments included:

"The play-based activities are great. The outdoor space enhances this and I feel the children massively benefit from having the outdoor spaces at Canniesburn"

"The rooms are well thought out to provide different opportunities"

"Staff are keen on ensuring play areas are safe and fun."

Areas for improvement

1.

To ensure that children's health, wellbeing and privacy is protected the provider should improve the nappy changing facilities for children under 2 years through upgrades to ventilation within the nappy changing spaces. The provider should also review toilet facilities for children aged under 2 years to ensure self contained toilet/nappy changing facilities are available.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4) and Care Inspectorate; Nappy changing for early learning and childcare settings (excluding childminders) Publication date: July 2023.

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 led well.

The management and staff team were committed to delivering a quality service for children and families. Recent changes in the leadership team, staff turnover and staff absence had impacted the extent to which the existing service improvement plan had been progressed. The provider had responded positively and moved quickly to sustain and improve the service.

Senior management (Area manager and Curriculum manager) were placed in the nursery to support the new manager. They shared their intentions to focus on building the team, supporting staff relationships and seeking the views of staff for future planning. A focused short term action plan had been formulated by senior management and shared with staff. Some priorities were already addressed at the time of inspection. This helped to promote a shared vision and culture of shared responsibility. Staff were motivated and responsive to meeting the needs of children and worked hard to create a positive ethos. Staff were keen to fully involve children and parents in the life of the centre. We acknowledged that the service had plans in place to support their improvement journey.

The senior management team planned to support the new manager and staff to develop a full improvement plan identifying the service priorities. Quality assurance processes to align with the improvement plan and evaluate quality of provision were in the early stages of planning. The service was beginning to gather feedback from children and their families to plan further development and improvement of the service.

Staff told us that they would benefit from engagement with the new management team to help them support sustained and continuous development of the service. Staff would welcome involvement in decision making, responsibility for leading aspects of provision, improved access to training and development opportunities.

We shared these comments with the management team who were aware of this and stated that the recent turnover of staff and staff absence had impacted on these opportunities. Management intended to continue to implement processes to meaningfully support staff. These included building on current plans that would allow time to share and reflect on practice, identify skills for leadership roles and provision of a staff training plan.

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Quality Indicator 4.3 Staff deployment.

Staffing levels were adequate and supported delivery of good care. At the time of inspection a new manager and depute manager were in post and the provider was actively recruiting to build a consistent staff team. Senior management were fully involved in this process and were supporting the manager and team through induction and appraisal processes. A system of mentoring and supervision was devised to support new staff (see area for improvement 1).

Plans were in place to deploy staff across the nursery based on knowledge, expertise and experience to fully support children and ensure that quality care and learning experiences were in place. We agreed with management that effective staff deployment was also needed to assist staff to carry out additional important tasks to enhance children's development, for example, developing play spaces and updating children's online learning journals. This was also of particular importance to provide the support younger children needed to settle into nursery or transition to other playrooms.

Senior management acknowledged that staff training had been limited due to staff turnover and absence and planned professional development reviews with staff that would help to formulate a whole staff training plan. Management were open to providing staff with opportunities to influence and progress the service improvement plan.

The provision of staff leadership roles and increased involvement in decision making within the newly structured team would help to strengthen and reassure the team and build positive working relationships.

Arrangements were in place to promote continuity of care across the day and ensure positive transitions and communication with families, for example, senior staff and keyworkers were available to chat and exchange information with parents. We saw parents settling younger children into nursery and engaging with staff to share information about their children's needs.

Staff communicated well with each other and worked together to ensure supervision and quality engagement with children across the day. Staff told us that they welcomed the open communication and collaborative approach from the new manager and were keen to work together to achieve their goals.

Senior management were confident that with their support, a positive outcome would be achieved within a short time frame.

Staff were feeling positive about the future and as a result were happy at their work, creating a warm and welcoming environment for children. Staff were caring and nurturing, keen for further professional development and were committed to improving the service.

Staff who spoke with us commented:

"I feel more settled now. There have been positive changes"

"Need continue to lift up staff morale and ensure we are supported."

Areas for improvement

1. The provider should continue with plans to support and build the staff team. Staff should continue to engage in training and development to assist them to support children well.

This is to ensure that 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, 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?	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?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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