

# Auchterless Pre-school Playgroup Day Care of Children

Auchterless Village Hall  
Kirkton of Auchterless  
Auchterless  
Turriff  
AB53 8BG

Telephone: 01888 511 066

**Type of inspection:**  
Unannounced

**Completed on:**  
30 August 2023

**Service provided by:**  
Auchterless Pre-school Playgroup

**Service provider number:**  
SP2003000413

**Service no:**  
CS2003002536

## About the service

Auchterless Pre-school Playgroup is situated in the village of Auchterless. The service is registered to provide a care service to a maximum of 20 children at any one time aged from two years to those not yet attending primary school.

The service has exclusive use of Auchterless Village Hall, which consists of a large hall, kitchen and toilet facilities. An enclosed outdoor area, adjacent to the hall, provides opportunities for outdoor play.

## About the inspection

This was an unannounced inspection which took place on 28 August 2023 between 09:40 and 14:10 and 29 August 2023 between 09:20 and 12:10. 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 using the service
- spoke with five parents
- reviewed families' responses to feedback questionnaires
- spoke with staff and the manager
- observed practice and children's experiences
- reviewed documents.

## Key messages

Children were cared for by patient, attentive staff, who knew them well.

Children experienced a variety of planned and spontaneous activities, which reflected their interests.

Staff had begun to develop planning of children's learning to support next steps.

Improvements to the setting had created a welcoming environment for children.

Quality assurance practices helped to promote positive outcomes for children and families.

## 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?	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 found a number of important strengths which, taken together, clearly outweigh areas for improvement. We therefore assessed this key question as good.

### Quality indicator 1.1: Nurturing care and support

Children were cared for by patient, attentive staff, who showed them respect and kindness. Staff knew children well and supported their individual needs. For example, when a child was uncomfortable with having a stranger in the setting, a member of staff distracted them with games to make them feel more comfortable. Parents told us that their children had been supported well to settle into the setting, with visits and individual arrangements being adapted to suit their needs. This helped children feel valued and welcome.

Children's care was supported by the effective use of personal plans. These were updated regularly with parents and contained information to promote staff understanding of children's needs. Staff used the strategies recorded in personal plans when supporting children, however, some required more detail to fully ensure staff's knowledge of these. We discussed this with management, who agreed to monitor the information in personal plans to ensure it consistently fosters positive outcomes for children.

Children were treated with respect and dignity during personal care. They were supported to be independent when using the bathroom, and staff were mindful of their privacy. This helped children to develop confidence and autonomy.

Children experienced relaxed, enjoyable mealtimes. They were offered a healthy snack of bread and fruit, which they helped to prepare. Children were offered milk and water with their snack, and water was available throughout the session to help children stay hydrated. Children brought packed lunches from home, and some parents told us they would like to see lunches provided by the setting. During the inspection, the group chose to eat outdoors. They sat at picnic benches, and had the choice of using plates for their packed lunch. Staff sat with children to help support a sociable, safe mealtime experience.

Children's wellbeing was promoted through the effective storage and recording of medication. When a child received medication, this was carried out respectfully and sensitively. The child was encouraged to move to a private space, where staff explained the purpose of their medication to them, supporting their understanding, and helping them feel cared for. One parent commented that, 'staff are excellent with children with health care needs.'

Positive experiences and outcomes for children were supported by positive professional relationships. Staff liaised with other professionals, such as health visitors, to support a shared understanding of children's needs. Where children attended two early years settings, staff shared information about their progress to help promote continuity of care.

**Quality indicator: 1.3 Play and Learning**

Children experienced a mixture of planned and spontaneous play experiences. Floor books and intentional planning formats were used alongside each other to reflect children's interests and needs. The staff team were developing their planning skills through ongoing training and support. Next steps for children were identified and recorded, however, further work was needed to fully reflect these in activities. This will help ensure all children's learning is fully planned for.

Children's progress was tracked by staff observations of their learning. Staff had attended training on making effective observations, and used their learning to develop their recording of children's achievements. Some staff were more confident than others, and was an ongoing area for development. Parents were invited into the setting to see their children's learning profiles and observations, and discuss their child's progress with staff. This contributed to positive relationships with families, however, whilst some parents felt they were well informed about their children's learning, others commented they would like more information.

Children's interests were reflected in activities. For example, a trip to a local farm had been arranged to follow an interest in farming. Staff and children discussed the crops in local fields, and this was reflected in children's work in the floor book. Further development of this theme included a planned activity using seeds and grains to further extend children's learning.

Children's learning was supported by staff who showed an interest, and chatted with them. For example: during a conversation about summer holidays the staff wondered, 'was the pool warm or cold?' and asked open ended questions such as: 'what was the weather like?' This helped children extend their thinking and develop communication skills.

Children experienced opportunities to develop literacy and numeracy skills. Staff used numeracy rich language during play and conversations. For example, when children filled containers from the outdoor tap, a staff member asked them if their buckets were full or empty, and spoke about who had the most. Environmental print throughout the setting provided various examples of numbers and text to promote children's awareness and recognition.

Books were available both inside and outdoors, however, these were not used during the inspection. Opportunities for measuring, weighing, matching and mark making were thoughtfully placed throughout the setting. These measures provided children with a range of numeracy and literacy experiences.

## How good is our setting?

## 4 - Good

We found a number of important strengths which, taken together, clearly outweigh areas for improvement. We therefore assessed this key question as good.

### Quality indicator: Children experience high quality facilities

Children were cared for in pleasant, welcoming surroundings. Recent improvements to the environment had helped to create well-defined areas, where children could choose to play as they wished. For example, the large home corner was furnished to create a homely space, with real life objects to foster children's imagination. Parents recognised improvements to the environment, with one telling us, 'staff have worked hard to make the area fun and inviting.'

Children's play benefitted from well thought out areas which provided a variety of experiences. Resources were displayed attractively to invite play in labelled storage baskets, with photos of their contents. This helped promote children's choice and independence. Access to some loose parts and real life items fostered children's curiosity and interest. Some areas, such as the home corner and outdoors, contained more of these resources than others. Staff should continue to develop these to help provide open ended play opportunities for children throughout the setting.

Children were able to choose to play outdoors for most of the session. Some parents commented that they would like to see their children accessing more outdoor play, and in all weathers. Secure gates to this area helped ensure children's safety. The outdoor area offered a variety of play experiences, including a climbing frame with a slide, and water play. Children enjoyed filling containers at a tap, which they emptied into a bucket on a large weighing scale. They played happily with utensils in the mud kitchen. This did not, however, contain mud and the manager agreed to store mud, or other suitable materials, near to the kitchen to enhance children's play.

Children's health and safety was supported by infection prevention and control measures. The setting was clean and fresh, and children were encouraged to wash their hands after using the toilet and before eating. They did not wash their hands after mealtimes, however, and the manager agreed to introduce this to help prevent infection risks to children and to comply with current guidelines. Nappy changing arrangements did not meet current guidelines, with a changing mat being used on the bathroom floor for changing children. This caused a risk of cross contamination. Management agreed to review nappy changing arrangements, and make changes to ensure that current guidelines are followed to help reduce potential risks of cross contamination (see area for improvement 1).

### Areas for improvement

1. To support children's wellbeing, and reduce the risk of cross contamination, the provider should ensure that nappy changing arrangements comply with current guidance. This should include, but not be limited to the provision of suitable nappy changing facilities.

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).'

**How good is our leadership?****4 - Good**

We found a number of important strengths which, taken together, clearly outweigh areas for improvement. We therefore assessed this key question as good.

**Quality indicator: Quality assurance and improvement are led well**

Children attended a service which benefitted from a clear vision, values and aims. The community ethos of the setting was reflected in staff's positive relationships with families. Staff had recently reviewed the aims of the service, and the manager told us they planned to give parents the opportunity to be involved in this process. We encouraged them to continue with these plans to help ensure a shared vision for all families and staff. The service was led by a management committee, and parents were able to participate through committee meetings and events.

Children's experiences were supported by evaluation of the service. Self-evaluation was in the early stages and this now needed to be further developed. We discussed the benefits of staff using the Care Inspectorate: 'Quality framework for daycare of children, childminding and school-aged children' to help evaluate outcomes for children and identify areas for improvement.

Parents views had been sought through feedback questionnaires. The manager recognised that this method had not suited all parents, and agreed to explore different ways of engaging with families. This will help obtain their views to inform ongoing improvements. Some children's views were reflected in the floor book planning, however, this could be further developed to capture their wider views on their experiences.

Positive outcomes for children were promoted by quality assurance practices, including regular auditing and monitoring of staff practice. One-to-one meetings and appraisals helped staff identify any professional development needs and feel confident in their roles. Quality assurance tasks were delegated throughout the staff team to promote shared responsibility.

Improvements to children's experiences were supported by a clear, realistic improvement plan. This was displayed within the setting to clearly show areas for development, how these were to be achieved, and progress as it was made. Once complete, improvements were reviewed to assess their effectiveness in helping to provide positive outcomes for children.

**How good is our staff team?****4 - Good**

We found a number of important strengths which, taken together, clearly outweigh areas for improvement. We therefore assessed this key question as good.

**Quality indicator: Staff Deployment**

Children were cared for by a staff team who worked well together. Staff communicated effectively with each other, and parents, to help ensure consistency of care for children. Ongoing training, and clearly defined roles, had improved leadership and teamwork within the staff team. Parents spoke positively of approachable staff and of the relationships that they had built with children.

Staff used their knowledge to make improvements and effectively support children. The manager kept an overview of all staff training and development, and staff completed an evaluation of training they had attended. They used this to evaluate their learning and how they planned to implement this into practice. This was reviewed after three months to assess the effectiveness of any new resulting practice.

Discussions at team meetings, and during one to one supervision meetings, provided further opportunity for staff to share their learning. These measures helped ensure staff used learning to develop positive practices in caring for children.

Children experienced consistency throughout the day, with staff planning ahead for any changes to the routine. Children's free flow access to outdoors, and pick-up and drop-off times were well managed to provide sufficient supervision to ensure children's safety and wellbeing.

There were, however, a couple of occasions where children's needs could have been better supported with more effective staff deployment. For example, during lunch children needing extra support were cared for by one member of staff, whereas more settled children had two staff supporting their group. The manager agreed to make small adjustments to staff deployment throughout the day to help ensure that staff skills, knowledge and time are best deployed to meet children's needs.

Children were cared for by a stable staff team. Additional staff had recently been employed to provide cover for absences, which promoted consistency of care. Robust recruitment processes and a comprehensive induction supported new staff in understanding and feeling confident in their roles and responsibilities. Parents spoke positively of the staff team, with one commenting, 'great playgroup, great staff.'

## 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 ensure children's learning is relevant, personalised and sufficiently challenging for their stage of development, the provider and manager should ensure:

- a) activity plans and planned learning are child centred and responsive to children's interests and life experiences
- b) a consistent approach to individual next steps for learning linked to activity plans and meet the needs of all children.



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

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials.'

**This area for improvement was made on 9 August 2022.**

#### Action taken since then

Planning had been developed to include floor book planning and intentional planning. These were used alongside each other to reflect the children's interests and needs. The staff team were continuing to develop their planning skills and the format that they were using. Next steps for children were identified and recorded.

Further work was needed to fully integrate children's next steps into planning. We discussed developing a next steps overview to help with this.

**This area for improvement had been met.**

#### Previous area for improvement 2

To ensure positive outcomes for children, the provider and manager should ensure there are opportunities for staff to discuss training and knowledge. They should then use this learning to improve their practice to provide consistently high quality outcomes for children.

This is to ensure staffing is consistent with the Health and Social Care Standards 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).'

**This area for improvement was made on 9 August 2022.**

#### Action taken since then

Staff completed an evaluation of training that they had attended, detailing their learning and how they planned to implement this into practice. This was reviewed after three months to assess the effectiveness of applying their learning to practice. Discussions at team meetings and during one to one supervision meetings with the manager, provided further opportunity for staff to share their learning.

**This area for improvement had been met.**

## Previous area for improvement 3

To ensure that high quality learning through play is at the heart of all improvements the provider and manager should:

- a) develop robust quality assurance and performance management processes
- b) access training, learning and development to help provide confidence in the leadership role
- c) undertake meaningful self-evaluation with staff, parents and children
- d) ensure there is an effective improvement plan in place that is fully implemented.

This is to ensure staffing is consistent with the Health and Social Care Standards which state that: 'I use a service and organisation that are well led and managed (H&SCS 4.23).'

**This area for improvement was made on 9 August 2022.**

### Action taken since then

- a) Positive outcomes for children were promoted by quality assurance practices, including regular auditing and monitoring of staff practice. One-to-one meetings and appraisals helped staff identify any professional development needs and feel confident in their roles. Quality assurance tasks were delegated throughout the staff team to promote shared responsibility.
- b) The manager was undertaking a formal qualification relevant to their role. This, along with staff training and input from the local authority had helped strengthen leadership and clearly defined responsibilities within the staff team.
- c) Children's experiences were supported by evaluation of the service. Self-evaluation was in the early stages, with staff using a format provided by the local authority. This now needed to be further developed, for example, by using the Care Inspectorate's 'Quality framework for daycare of children, childminding and school-aged children' to help identify areas for improvement.
- d) Improvements to children's experiences were supported by a clear, realistic improvement plan. This was displayed within the setting to clearly show areas for development, how these were to be achieved, and progress as it was made. Once complete, improvements were reviewed to assess their effectiveness in helping to provide positive outcomes for children.

**This area for improvement had been met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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?	4 - Good
4.3 Staff deployment	4 - Good

## 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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.