

# Arbor Green Nursery Day Care of Children

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**Type of inspection:**  
Unannounced

**Completed on:**  
17 August 2023

**Service provided by:**  
Arbor Green Nursery Ltd

**Service provider number:**  
SP2008010008

**Service no:**  
CS2009194088

## About the service

Arbor Green Nursery is registered to provide a service to a maximum of 56 children aged from three months to not yet attending primary school.

The service is based in the Stockbridge area of Edinburgh. The premises consists of two playrooms. One solely for babies and children under two years of age and one larger playroom that is shared by children aged two to five years. The service has large grounds that have fixed structures, which offer shade and shelter.

The service is close to local shops and parks and is serviced by good transport links.

## About the inspection

This was an unannounced inspection which took place on 15 August 2023 between 8:45 and 17:30 and an announced inspection on 17 August 2023 between 9:30 and 15:30. 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 twenty people using the service and received responses from 24 parents to our questionnaire
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Feedback was given on 17 August 2023 to the management team and the Quality Improvement Officer from the City of Edinburgh council.

## Key messages

- Children had opportunities to spend time outdoors for most of the day, where they were supported to lead their own play and learning
- Children were involved in growing and harvesting vegetables and learning about their environment.
- Approaches to observations and planning should be improved to provide children with personalised learning experiences.
- The environment should reflect children's age and stage of development and interests.

## 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?	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?

## 3 - Adequate

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

### Quality indicator 1.1 Nurturing care and support

Children experienced warm and caring interactions from staff. Staff were respectful as they asked children if they were ready to have their nappy changed or for their noses to be wiped. Children could visit their siblings in another room to play which promoted a sense of security and comfort. Parents commented "I like the staff, I feel confident that my son is looked after by competent people who he has a connection with", "The staff are all incredibly kind and warm, and show genuine love for my children" and "I'm confident staff are responsive to my child's need".

However, the younger group of children were not always responded to appropriately, for example when upset, staff often told them they were okay. This did not address their needs or validate their emotions. Staff should increase their understanding of child development to appropriately support children's emotional regulation. Staff must be supported to reflect on the principles that underpin the Scottish Government, 'Health and Social Care Standards', such as dignity, respect and compassion and ensure these translate into their daily practice. This would contribute to all children experiencing warm, nurturing care and support (see requirement 1).

A parent who returned our questionnaire said that the service dealt well with their child's allergies. However we found that information about children's allergies was not clearly recorded and updated. This had the potential for children to be given the incorrect food which could make them unwell. Furthermore, written information lacked instructions about what action staff should take if a child had an allergic reaction. The provider should ensure that information is correctly recorded to allow staff to meet the needs of the child (see requirement 2).

Medication was appropriately stored. The service was not following their own policy as there was un-prescribed medication for one child. The service should ensure that they follow their own policy. Medication forms used were not in line with best practice. We signposted managers to the 'Management of medication in daycare and childminding services' and the City of Edinburgh council's recently updated medication forms.

Both rooms in the nursery had a covered outdoor area for children to have snacks and meals. This provided children with a designated space for eating and the older children benefited from a rolling snack. Children benefitted from the home cooked food provided by the in-house chef. The older children experienced relaxed and calm mealtimes, staff were available to support children when required. A communal platter of fruit was served at lunchtime, there were no serving implements so children had to use their hands. Staff should consider the hygiene aspect of this. On the first day of the inspection, children in the under twos room were not adequately supervised at lunchtime. We spoke about the importance of adequate supervision at lunchtime to ensure children's safety and by the second day of the inspection, the lunchtime experience had improved. This should be monitored to ensure that children continue to be adequately monitored whilst eating to ensure their safety.

The service currently used different systems to record information about children. When children started at the service, parents recorded information about their child on 'Nursery in a box'. We found that this

information was not always shared with key workers and staff working with the child. We discussed with management that this information must be made available to staff so that they are aware of the child's needs and can plan to meet them. In addition, information about children should be updated with parents every six months or sooner if there is a change in a child's needs. This would allow staff to have the relevant information to meet the needs of children. We discussed with management ways in which they could do this, to ensure that important information about children's care, play and learning was updated and shared between parents and staff (see requirement 2).

Staff understood the importance of sleep for children's overall development. Routines reflected individual children's needs. Staff had received training from Sleep Scotland and as a result were well informed about the importance of safe sleep practices. This meant that children's safety and wellbeing were being supported through sensitive arrangements for sleep routines.

### Quality indicator 1.3 Play and learning

Children in the over twos room had access to the large garden throughout the day. This allowed them to be meaningfully and actively involved in their play and learning and promoted choice and independence. Staff supported children's creativity and enquiry through a range of activities and resources. Children were observed to be engaged in play throughout the inspection. We spoke with staff about ways in which they could increase the opportunities for numeracy and literacy in the outdoor area. We discussed ways in which they could do this to enable children to reinforce their learning through meaningful connections, such as numeracy in the mud kitchen.

Children in the over twos room had opportunities to take part in Eco-schools and nature kindergarten activities. The staff member who was responsible for this was very passionate about sharing their knowledge with the children. They spoke about linking the learning to children's interests. Two children took us on a tour of the outdoor area and told us about what they had been learning. They told us "We recycle so that rubbish doesn't go in the sea or on the ground, so we are helping the planet". They described how they had learnt about the rainforests and the activities they had taken part in in the Eco caravan. This gave children a sense of environmental responsibility.

Children benefitted from daily play and regular physical play in the large gardens. Children grew food in the garden and polytunnel which they harvested for snack, lunch and baking. This fostered a connection to nature and promoted healthy eating habits. On the day of the inspection, children were picking the tomatoes which grew in abundance. This impacted positively on their social, emotional, mental wellbeing as well as their cognitive growth. Parents who returned our questionnaires were very positive about the outdoor space, their comments included "The children spend lots of time outdoors and go on trips", "we love that they plant and grow veg", and "the outdoor space is great". Children in the under twos room spent time outdoors in their garden throughout the day. We discussed with staff that more mark making materials and resources should be made available to allow children to be more creative.

Staff in the under twos room read to children throughout the day both individually and in small groups, this contributed to children's interest in books. Staff spoke with children about what they were doing, which encouraged their language development. Staff should ensure that singing does not replace verbal communication at times such as when children are upset. This would further support children's feeling of security.

In the under twos room, planning approaches to play and learning were often adult directed and activities were not always age appropriate and individual to children's interests. We discussed with staff the importance of a well resourced environment and the importance of familiar environments to provide

opportunities for role play, such as a home corner, to nurture imaginative play and social development. Current child development, theory and practice was not always used effectively to develop quality play and learning experiences (see area for improvement 1).

Learning Journals were used to record observations about children and share this information with parents. There was a lack of meaningful and quality observations which meant that staff could not plan to support children's individual next steps in learning. Many of the observations were generic and lacked individual information about children's play, care and learning. This had the potential to hinder an understanding of children's needs, interests and developments. It also lacked information to keep parents informed about their child's learning. Some parents felt involved in their child's time at the nursery and commented "I'm fully involved to my child's learning and days at the nursery". Although most parents told us that they did not feel informed about their child's time at nursery. Their comments included "I would like to see more regular updates on the app", "Learning journals could be improved", "I would like for the learning journals to be updated and accurate", "I have no idea what my child does all day as they are too young to tell me. I wish I had more updates from the nursery"(see area for improvement 2).

Younger children had trips within the local community to the library, to see the trams and to visit the duck pond. Older children had trips out in nature with the Eco schools group. This allowed children to build links with and learn about their local community.

## Requirements

1. By 01 December 2023, the provider must ensure that all children are recognised as individuals and treated with dignity and respect. To do this, the provider must, at a minimum:

- a) ensure that children are appropriately comforted and their feelings acknowledged
- b) ensure that staff develop their understanding of their role and responsibility of upholding children's rights
- c) ensure that staff practice is underpinned by the principles of the Health and Social Care Standards.

This is to comply with Regulation 4(1)(a)(b) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention.' (HSCS 3.1).

'I experience warmth, kindness and compassion in how I am supported and cared for, including physical comfort when appropriate for me and the person supporting and caring for me.' (HSCS 3.9).

2. By 01 December 2023, the provider must ensure that children's individual needs are met through effective recording of information in personal plans.

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

- a) that there is a system in place to share information gathered from parents with the child's key worker and that this information is accessible to all staff
- b) that information about children is updated with parents every six months or sooner if there is a change.
- c) that information about children's allergies and medical needs are updated, with appropriate information so that staff can meet their needs.

This is to comply with Regulation 4(1)(a)(b) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'My personal plan (sometimes referred to as a care 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)

## Areas for improvement

1.

To support children's learning and development, the provider should ensure that the environment in the under twos room is well resourced. This would allow children to lead their own learning and revisit areas to support their overall development and learning. Activities and resources should be planned to inspire curiosity, awe and wonder in children.

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

'As a child, I have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling' (HSCS 1.31).

2.

To support children's learning, the provider should ensure that regular observations of children are written in a meaningful manner and then used by staff to plan individual learning opportunities.

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

'My personal plan (sometimes referred to as a care 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).

## 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 nursery environment was well-designed and provided a comfortable and stimulating space for children to play. We spoke with children who told us how much they liked the nursery. The service had a large outdoor space. Each playroom had their own garden and also had access to the polytunnel and other growing areas. Children benefitted from spending most of the day outdoors in the garden. They were actively involved in growing food and parents were positive about the outdoor area. Their comments included "I love that most of the time is spent outdoors", "I love the outdoor method" and "I love that the children are primarily outdoors".

Both play rooms were comfortable, and well arranged, which gave children ample space to play. Soft furnishings and lighting was used to create a homely environment. There were a range of loose parts and open ended resources. The rooms were bright and well ventilated with windows and doors to outside open.

Some areas of the under two's room could be improved to make them more developmentally appropriate and we shared ideas with staff about how they could do this to reflect the children's age and stage of development. There were a lack of resources readily available for children to independently choose from should they wish to be creative. We discussed with staff and management that they should consider this when they review the environment. We discussed with staff that an adult sized chair would support staff to sit comfortably with children, especially as younger babies were attending the nursery. This would also support breastfeeding mums to be comfortable.

Children in the over twos room were supported with hand washing throughout the day, particularly before meal times. However, there were a few occasions where children required further support to wash their hands correctly. We highlighted this during the inspection and staff agreed to monitor this. This would contribute to children's overall health and wellbeing and reduce the spread of infection.

A handyman was available to ensure that the setting and equipment were safe, secure and well maintained. Damaged items were fixed or replaced in a timely manner. This contributed to children enjoying a safe environment.

## How good is our leadership?

## 3 - Adequate

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

### Quality Indicator 3.1 Quality Assurance and improvement are well led

The management team told us about the quality assurance and self evaluation processes that they carried out. For example, introducing leaderships roles, sampling learning journals and monthly staff meetings, however, we could not see the impact of this. There were significant gaps in the areas covered by the quality assurance systems in place. We discussed that further progress was also needed to ensure leadership roles had an positive impact and to have a more structured assessment of learning journals. Inconsistencies in practice were not fully identified and did not highlight areas for improvement. There were significant gaps in identifying what was working well and areas for improvement. This meant that the quality assurance systems were not yet effective (see requirement 1).

Most parents were positive about the leadership within the nursery. Their comments included "I'm so impressed with the day to day leadership at the nursery" "Managers are very responsive" and "I find the leadership team want to hear input from parents often". We saw examples of where the service had involved children and families in ongoing improvements. For example, a policy of the month was shared with parents for their comments, and a questionnaire had been sent to parents asking for their views. At that time parents had asked for more trips in the community and these had been increased as a result. However, parents said that these had become less frequent again. Management agreed that this improvement had not been sustained but plans were in place to address this. A cheese and wine night had been arranged for parents to come into see the nursery and meet with staff, and parents were very positive about this experience. A parent told us "We had the opportunity to share our wishes for the nursery at a wine and cheese night and during the individual parents meeting we have with the key workers".

Since the removal of Covid-19 restrictions, parents were not routinely going into the nursery to drop off and pick up their child. Some parents expressed a desire to come back into the playrooms, telling us:



- "It is chaotic at drop off and pick up. Can take ages and really difficult to get all your kids clothes back."
- "Fully acknowledging how busy it is at pick up and drop off it would be good to get introductions to new staff. I admit I don't know the name of all the staff members."
- "Sometimes at pick up I try to ask the staff about my child's day as I have not heard through any other forum, they don't appear to have time to tell me this as pick ups are very busy."
- "Parents aren't invited into the internal part of the nursery, so sadly haven't seen the area where they sleep."

We discussed with the management team that parents should be invited back into the nursery on a daily basis to drop off and pick up their child. This would allow for effective two way communication and lead to better outcomes for children. It would also allow parents to feel involved in their child's time at the nursery and recognise the importance of these relationships. The manager agreed to consult with parents and review this practice.

## Requirements

1. By 01 December 2023, to improve outcomes for children, the provider must ensure that they have developed and implemented an effective system of quality assurance to monitor and improve all areas of practice. This must include ongoing self-evaluation that leads to continuous improvement.

This is to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 - Regulation 3 Principles and Regulation 15 (a) and (b) Staffing.

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).

## 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 communicated and worked well together to support children. They were a supportive staff team. Staff told us that they felt supported by management and that it was a happy place to work.

There were enough staff to meet the ratios and agency staff were employed to cover absences. The manager said that they tried to have regular agency staff so that they were familiar to children. We saw that agency staff were not always directed by staff to ensure positive outcomes for children. We discussed with management that agency staff should be better directed to ensure that they are aware of their roles and responsibilities and to provide continuity of care for children.

The under twos room was a thoroughfare for staff to access the kitchen and office. This meant that there were a lot of people walking through the room, which disrupted children's play. We discussed that they should consider the impact that this has on children throughout the day.

Parents were very positive about staff, their comments included:

- " There is always plenty of staff and there is a core team that have worked there for years, which is important for the continuity of care of the children"
- " The staff is what makes this place so great".
- " The team at Arbor are exceptional. We couldn't be happier with the care they provide."

## 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 keep children safe and maintain their wellbeing, the provider should improve staff knowledge in relation to safeguarding. This should include staff developing a broader understanding of the spectrum of concerns and improving their knowledge of effective reporting procedures.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

**This area for improvement was made on 25 July 2022.**

#### Action taken since then

All staff had attended a full day child protection training in house. Staff spoken with were positive about the training and confident in their knowledge of what they would do should they have a concern about a child.

This area for improvement has been met.

#### Previous area for improvement 2

To ensure consistently positive outcomes for children are achieved, the provider should further develop quality assurance processes that recognise strengths and identify areas for improvements. This would include having effective processes for monitoring, auditing and evaluating key aspects of children's care.

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 25 July 2022.**

#### Action taken since then

The quality assurance processes currently in place were not effective in recognising strengths and identifying areas for improvement.

A requirement has now been made.

## 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?	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?	4 - Good
4.3 Staff deployment	4 - Good

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