

Spring Oscars @ St.John's Day Care of Children

St.John's RC Primary School
18 Duddingston Road
Edinburgh
EH15 1NF

Telephone: 07971 095179

Type of inspection:
Unannounced

Completed on:
27 September 2023

Service provided by:
Out of School Scotland Limited

Service provider number:
SP2007009266

Service no:
CS2010279825

About the service

Spring Oscars @ St.John's is based in a local primary school, situated on the outskirts of Portobello, Edinburgh. The school building is close to local transport links, parks and other amenities.

Children have use of a large dining hall and gym hall. They also have access to the playground. Toilet facilities are available within the school.

The service is registered to provide a care service to a maximum of 40 primary school aged children during term time only.

About the inspection

This was an unannounced inspection which took place on Tuesday 19 September 2023 between 15:20 and 17:55. We returned announced to the service on Wednesday 20 September 2023 to visit the breakfast club between 07:45 and 09:00 and Thursday 21 September 2023 between 14:30 and 18:00.

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, complaints information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with many children using the service and received feedback from six parents/carers through our online survey and spoke with two parents onsite during the inspection,
- spoke with eight staff and the management team,
- observed practice and children's experiences,
- reviewed documents.

Key messages

Personal plans needed to improve so that staff could effectively plan for children's care, play and learning needs.

Children would benefit from staff developing their understanding of good practice in relation to school age childcare and children's wellbeing.

Leadership of the service needed to improve to enable the team to develop an effective approach to improvement planning and quality assurance.

Children had some opportunities to have fun and develop life skills through a range of activities.

Some children had developed positive and supportive relationships with caring staff.

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?	3 - Adequate
How good is our leadership?	2 - Weak
How good is our staff team?	3 - Adequate

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

How good is our care, play and learning?

3 - Adequate

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

Quality indicator 1.1: Nurturing care and support

Most children were settled and happy. Some children told us they enjoyed being with their friends and playing outside. Most children had developed positive relationships with staff who were friendly and welcoming.

Overall, staff supported children through their daily experiences with warm engagement. For example, staff chatted with children and helped them when they were upset. Praise and encouragement supported children's confidence and self-esteem, promoting their wellbeing. However, there were occasions when this support was inconsistent. For example, at times the language used stereotyped children based on their gender, or staff did not explain requests to children in a manner that promoted their emotional wellbeing. Staff would benefit from further developing their understanding of emotionally supportive practices. Some progress had been made in relation to a requirement from an upheld complaint, but more work was needed to strengthen staff knowledge and practice to ensure children experienced consistently positive care and support. As a result, we have continued some aspects of the requirement as part of a new requirement to allow time for improvements to be embedded (see requirement 1).

Snacks were healthy and promoted a balanced diet for children. There was plenty of fresh fruit and a range of choices. Children had opportunities to develop their independence and self-help skills. For example, they prepared their own sandwiches and cleared away their plates. Some staff understood the importance of snack times being social and unhurried experiences so they sat with children as they ate. However, this practice was not always consistent and at times some staff became task focused and moved away. To ensure children are nurtured and safe, staff should be more attentive and present within the snack time routine.

Most children had personal plans in place, these included their likes, dislikes, and medical care needs. The staff team had started to review personal plans and were beginning to identify gaps in the information held for children. However, many personal plans had not yet been effectively reviewed to evaluate children's current or changing needs. For some children personal planning approaches were not being used effectively to support and enhance their experiences. Some progress had been made in relation to a requirement made as part of an upheld complaint, but more work was needed to ensure children benefitted from effective personal planning approaches (see requirement 2).

Children's health and medication needs were met as required medication was available on site. This helped to promote children's health and wellbeing. Systems were in place that helped staff to know which children had health care needs and how these should be managed. For some children the information had not been reviewed within good practice timescales. To ensure staff have up to date information to keep children safe, quality assurance in relation to medication should be improved (see area for improvement in 'How good is our leadership?').

Quality indicator 1.3: Play and learning

Most children were having fun and engaged in activities of their choice. One child said, "I like it better than the other clubs I go to". Children were often busy doing arts and crafts, playing board games, or building with construction materials such as Lego and wooden blocks. These experiences aided children's creativity and problem solving through play. While children enjoyed these activities there were opportunities to further extend the range of materials available to promote children's play. On the second day of the inspection, there were a wider range of activities available, however the service should continue to build on this to support play experiences. For example, children would benefit from the introduction of more open-ended materials and loose parts that can be used for a multitude of play purposes. Extending materials and resources would support children to have greater choice and provide more interesting, varied experiences (see area for improvement 1).

Staff responded to children's interests and provided additional materials when children requested these. This helped children understand that staff respected their play choices. However, children's interests were not always being identified by staff and interests and needs were not used well to plan experiences. For example, children's interests in specific subjects were not always reflected in the experiences and activities on offer. One child said, "I like the activities but maybe it would be good if we could spend more time in the gym hall. I like to run around before school." Staff should further develop the ways they consult with children to gather their views on the experiences and resources they would like at the service. This would ensure children's voices are used to meaningfully plan the play experiences each day.

Requirements

1.
By 22 December 2023, the provider must ensure children experience interactions and support that promotes their emotional wellbeing.

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

- a) Staff display a good understanding of nurturing care, responsive, emotionally supportive, and developmentally enriching relationships;
- b) Access training/professional development on nurturing care and trauma-informed practices. Staff must display a good working knowledge of this.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state, 'As a child or young person I feel valued, loved and secure' (HSCS, 3.10).

2. Children's needs and wellbeing must be effectively supported through meaningful personal plans. The provider must ensure individual personal plans have the appropriate information and strategies of support, to ensure children experience care and support that is right for them.

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

- a) Personal plans must include key information relating to the child and their personal circumstances;
- b) Personal plans must clearly set out how children's needs, preferences, and care will be met, and include

any individual strategies of support to be implemented;

c) Personal plans must be reviewed at least every six months, or sooner, if required;

d) The manager must have an overview of children's personal plans, and establish a systematic quality assurance process, to ensure personal plans are effective and that children's needs are being met, in line with the information set out within their personal plan.

To be completed by: 25 August 2023

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This is in order to comply with:

Regulation 5(2)(b)(ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement has not been met. As a result, we have restated the requirement with a new timescale of 1 December 2023.

Areas for improvement

1. To ensure children experience challenge and depth in their play, the service should improve the range of resources and experiences taking account of children's needs and interests.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state: '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' (HSCS 1.31).

How good is our setting?

3 - Adequate

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

Quality indicator 2.2: Children experience high quality facilities

Children were accommodated in a secure, clean, and well-maintained building. They had enough space to meet their needs, moving freely around the play spaces. Direct access to the outdoor playground enabled children to experience fresh air and exercise daily. These aspects of the environment supported some of the children's health and welfare needs.

Handwashing practices in the breakfast club sessions were inconsistent and not aligned to good practice guidance. Children did not wash their hands before eating breakfast. This had the potential to allow germs to spread. To promote children's health and wellbeing, the provider should ensure staff support children in effective and consistent handwashing practices. This is to limit the spread of germs, while enabling children to develop positive hygiene habits (see area for improvement 1).

The service was beginning to develop defined spaces that invited children into play. For example, rugs were

used to display items on the floor and a well-organised art unit enabled children to access a range of creative materials in this area. To build on this, the service should continue to improve the resources and experiences provided to ensure they meet children's interests and developmental needs (see area for improvement in 'How good is our care, play and learning?').

Children's wellbeing and comfort needs were not being sensitively met as there was a lack of comfortable spaces for them to use. While a rug and some cushions were available as a book area this space was not inviting. For example, on the first inspection day there was only a few cushions, and the box of books was not attractively displayed. Some children told us it could get noisy inside the main hall and that they would like quieter areas to relax, read and chat. To support children's emotional wellbeing and comfort needs, the service should ensure a variety of spaces are developed, including inviting, comfortable areas (see area for improvement 2).

Staff maintained children's safety as they supervised drop offs and collections. They used systems to ensure children were signed in and out of the service. Some parents requested older children walked home independently, and staff took appropriate actions to aid children's safety. For example, staff communicated with parents when the child left and followed up when children arrived home. However, when viewing some children's plans improvements were needed to the information agreed to ensure it provided clarity. For example, while permission had been sought the risk assessment relating to individual children needed further developed to ensure clarity of actions for all parties, including the staff, child, and parent. As part of each child's personal plan, these arrangements should be effectively recorded, implemented and reviewed (see requirement 1 in 'How good is our care, play and learning?').

Areas for improvement

1. To promote positive hand hygiene and limit the spread of germs, the service should ensure children are supported to engage in effective handwashing in line with good practice guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS, 4.11).

This is to ensure the environment is consistent with 'Infection prevention and control in Childcare settings (daycare and childminding) (Health Protection Scotland, 2018).

2. To promote children's comfort and emotional wellbeing, the service should develop comfortable and inviting spaces for children to rest and relax.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax (HSCS, 5.6).

How good is our leadership?

2 - Weak

We made an evaluation of weak for this key question. Whilst some strengths could be identified, these were compromised by significant weaknesses.

Quality indicator 3.1: Quality assurance and improvement are well led

Several leadership and staffing changes had an adverse impact on the ability of the service to improve. The leadership arrangements at the time of the inspection meant less experienced staff were overseeing the service. All staff including those in leadership roles would benefit from support to develop the skills needed to effectively lead the service.

A shared vision for the service had not been well developed. As a result, positive practices were still being established. To ensure children experience consistent and positive care, staff needed more effective opportunities to reflect together, using good practice to help review and benchmark the quality of the service.

Improvement plans not were having a positive impact and were not yet supporting continuous improvement. An action plan had been formed in respect of the requirements and areas of improvement made during the complaints investigation. While some improvements had been made to effectively support and improve children's experiences, further work was needed to ensure improvement planning was meaningful and effective. For example, while staff interactions were more considered, there remained missed opportunities to sensitively meet all children's emotional wellbeing needs. The provider should implement clear and focused improvement planning approaches that support children to have consistently positive experiences (see area for improvement 1).

Quality assurance processes were in the early stages of being developed and implemented. For example, the current staff team were beginning to audit children's personal plans to identify gaps. However, further development of quality assurances processes was needed to aid continuous improvement. Areas of the service that would benefit from improved quality assurance included but were not limited to, the quality of the environment and the development of staff practice. There were also issues with staff professional registrations that had not been identified through the provider's quality assurance checks (see area for improvement 2).

Parents and children had informal opportunities to provide feedback. At times, this was influencing the service. For example, children's wishes for snacks were welcomed and respected. While many parents spoke positively about the engagement and communication from staff, some felt collaboration and communication could be further developed. Parents and children should have regular and meaningful opportunities to engage with staff and collaborate together. An area for improvement made during the complaint investigation has been continued to support the embedding of respectful and collaborative communication with families (see area for improvement 3).

Areas for improvement

1. To enable the service to make meaningful improvements, the provider should support the management team and staff in consultation with children and families, to develop a clear, focused and effective improvement plan that addresses the needs of the service.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. To improve the quality of the service, the provider should develop effective systems for quality assurance in order to monitor all areas of practice and improve outcomes for children.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

3. The provider should ensure that staff recognise the importance of engaging with families, through respectful communication and collaboration.

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

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

Prior to the inspection, staff told us that staffing had been less consistent but since returning from the summer break children were cared for by a mainly consistent staff team. Parents told us that staff had developed positive relationships with children and families. One parent commented. "The staff are very friendly and supportive".

Staff were flexible and supported each other to work as a team to benefit children. They communicated their movements and asked for support when needed. Walkie talkies enabled staff to communicate children's movement, helping to keep them safe and supported. As a result, staff were positioned within all areas to supervise children and were alert to changing needs.

While staff were friendly and attentive towards children, the mix of the skills, knowledge and experience within the team needed to develop to ensure children experienced consistently positive outcomes. There were gaps in staff skills which limited the quality of interactions and experiences. For example, staff needed to further develop their approach to understanding trauma informed practice and the principles of play work. All staff should be supported to develop their practice through a range of learning and support opportunities, including tailored training and effective monitoring arrangements. This is to ensure children are cared for by trained and skilled staff who support them to thrive within the service (see area for improvement 1).

Areas for improvement

1. To improve the quality of care and support children experience, all staff should be supported to develop their skills and practice through a range of learning and support opportunities, including tailored training and learning opportunities and effective monitoring arrangements.

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

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

Requirements

Requirement 1

The provider must protect children from potentially harmful behaviours. To do this, the provider must, at a minimum, ensure:

- a) Staff reflect on their behaviour towards children, by considering how this could impact on their emotional wellbeing;
- b) Staff display a good understanding of nurturing care, responsive, emotionally supportive, and developmentally enriching relationships;
- c) Access training/professional development on nurturing care and trauma-informed practices. Staff must display a good working knowledge of this.

To be completed by: 25 August 2023

This is to ensure care and support is consistent with Health and Social Care Standard 3.10: As a child or young person I feel valued, loved and secure.

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 8 June 2023.

Action taken on previous requirement

Staff had some opportunities to reflect on their work including how their interactions and behaviours impacted on children. While more opportunities were needed to build on this and develop a shared vision of practice, overall during this inspection staff did not display behaviours that placed children at risk of emotional harm. However, staff would benefit from further opportunities to continue reflections as a team to ensure a consistent and embedded approach to supporting children's emotional wellbeing.

Staff were beginning to develop an understanding of nurturing relationships and some practice observations showed they were more attuned to children's development needs. While most children experienced positive interactions further work was needed. For example, in relation to areas such supporting children to discuss their feelings and understanding children's right to personalised care.

Work had been undertaken to support individual staff to develop their understanding of nurturing care and trauma informed practices. However, this work was at an early stage and not consistent across the team. To support a shared understanding and ensure consistent practices staff needed further opportunities to engage in professional development activities through improved training and guidance.

Some elements of this requirement remained outstanding and have not been met. As a result, we have made a new requirement with a new timescale of 22 December 2023. See 'How good is our care, play and learning.'

Met - within timescales

Requirement 2

Children's needs and wellbeing must be effectively supported through meaningful personal plans. The provider must ensure individual personal plans have the appropriate information and strategies of support, to ensure children experience care and support that is right for them.

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

- a) Personal plans must include key information relating to the child and their personal circumstances;
- b) Personal plans must clearly set out how children's needs, preferences, and care will be met, and include any individual strategies of support to be implemented;
- c) Personal plans must be reviewed at least every six months, or sooner, if required;
- d) The manager must have an overview of children's personal plans, and establish a systematic quality assurance process, to ensure personal plans are effective and that children's needs are being met, in line with the information set out within their personal plan.

To be completed by: 25 August 2023

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This is in order to comply with:

Regulation 5(2)(b)(ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 8 June 2023.

Action taken on previous requirement

Some work had started to improve the approach to children's personal plans. However, this was not yet effective and for some children their personal plans were not yet supporting the delivery of quality care and support. For some children gaps remained with the information recorded and how staff were using this information to meet their needs. Strategies of support were not yet well developed and as a result there were missed opportunities to effectively support children.

This requirement has not been met. As a result, we have restated the requirement with a new timescale of 1 December 2023.

Not met

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

The provider should ensure that staff recognise the importance of engaging with families, through respectful communication and collaboration.

This is to ensure care and support is consistent with Health and Social Care Standard 3.1: 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.

This area for improvement was made on 8 June 2023.

Action taken since then

Staff were more aware of their interactions and how to approach children and families. However, further work was needed to support staff to reflect on their interactions and develop confidence and skills when engaging with parents and children. Improved communication was also needed to ensure parents were informed about key aspects of the service, including but not limited to staffing changes and management arrangements.

To support improvement, we have restated this area for improvement.

Previous area for improvement 2

The provider should ensure that families' rights to confidentiality, and privacy, are respected when sharing information with partner agencies.

This is to ensure care and support is consistent with Health and Social Care Standard 4.18: I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected.

This area for improvement was made on 8 June 2023.

Action taken since then

The service had reviewed its approach to sharing information. While still upholding good practice in relation to safeguarding, the service now sought parents permission to engage with partner agencies and professionals, such as class teachers when discussing children's needs or support requirements.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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