

Daisychain Nursery Day Care of Children

144 - 146 Commercial Street
Kirkcaldy
KY1 2NU

Telephone: 01592 598 800

Type of inspection:
Unannounced

Completed on:
16 October 2023

Service provided by:
Daisychain Nursery Kirkcaldy Ltd

Service provider number:
SP2003001667

Service no:
CS2006115091

About the service

Daisychain Nursery is registered to provide a care service to a maximum of 67 children at any one time, aged from zero to an age to attend primary school, of whom:

- no more than 15 children aged zero to under two-years
- no more than 15 children aged two-years to under three-years
- no more than 37 children aged three-years to an age to attend primary school.

The service is located in Kirkcaldy, Fife, and was delivered from three separate buildings. One building was a two-storey building that accommodated younger children. There was a baby room, tweeny room, and toddler room with access to nappy changing facilities and toilets. The manager's office was located in this building and children could access a small outdoor play space. On the opposite side of the street, the second building accommodated children aged from three-years until they attended primary school. Children had access to a large playroom with a kitchen/dining area, toilets, and an outdoor space. A unit next to the second building had been developed to provide space for a family room with kitchen and toilet facilities, and a sensory space for children.

About the inspection

This was an unannounced inspection which took place on 16 October 2023 between 08:30 and 18:00. We provided feedback to the service at the end of the inspection visit. 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, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with several children using the service
- observed practice and daily life in the service including staff interactions with children
- spoke with families that used the service
- spoke with staff
- received feedback from a Microsoft Forms survey sent to families
- reviewed documentation.

Key messages

- Children felt safe and secure because they were cared for and nurtured by staff that supported their emotional wellbeing.
- Systems for recording the management of medication should be developed using best practice guidance to ensure they keep children safe and healthy.
- Mealtimes should be developed so that children benefit from a calm, unhurried, sociable, and safe experience that supports their independence.
- Children were relaxed and engaged in an environment that provided a variety of spaces that supported positive outcomes for them.
- Children felt they belonged in the local community when they visited a local care home, the beach, and the forest.
- Children and families benefited from the strong relationships they had developed with staff, and were supported to have their views heard in the development of the service.

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 evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children felt welcomed, valued, and safe because they had developed positive attachments with staff. Children received cuddles, could choose to have their comforters and could cuddle up and rest in quiet, comfortable spaces. Staff interacted with children in a warm, kind, and compassionate way.

Children's overall wellbeing was supported by staff working in partnership with families to develop personal plans. Children's routines and the wishes of parents were considered when planning care and support. For example, sleep routines were agreed and managed in line with safe sleep guidance. This meant that in most instances, routines were consistent both at home and in nursery. A parent said, "Cute little sleep mats with a cosy blanket is given for rest time." Chats with staff confirmed that they knew children well and were responsive to children's needs. There was ongoing development of chronologies and care plans for all children. This will ensure that important information about children is detailed and updated to meet their changing needs. A parent said, "The staff know my son very well."

Children were healthy because staff managed medication to a good level. The safe storage of medication and information recorded guided staff. The service should review and develop the recording format to ensure it complies with good practice guidance, 'Management of medication in daycare of children and childminding services.' This will ensure that systems and processes minimise any potential risk to the wellbeing of children. **(See area for improvement 1)**

Most children experienced a sociable and unhurried mealtime experience. The routine for lunch time was relatively calm. Children had child size seating that supported them to sit comfortably whilst eating. They were encouraged to eat independently. Staff respectfully supported children that needed help with eating, and ensured children's dignity by encouraging them to wash their hands and face when they had finished their lunch. Some staff sat with children using the opportunity to chat with them. The service should continue to review and develop mealtimes across the service. Improving the mealtime experience through, for example, providing opportunities for children to develop life skills will promote positive outcomes.

Quality indicator 1.3: Play and learning

Most staff had a good understanding of how children learn through their play. They promoted literacy, language, and numeracy to a good level through singing and storytelling. Children's interests and preferred play were responded to effectively by staff. Excited babies played with sand in a suitcase and used pots and pans as drums. Some staff had an understanding of, and were developing their use of effective questioning to extend children's experiences and learning. A balance of planned and spontaneous experiences supported children to be imaginative and curious.

Children were developing an interest in science, technology, engineering, and maths (STEM). A book about the body had children jogging on the spot and talking about how their heart rate had increased. They were learning about making healthy lifestyle choices. The outdoor mud area had children mixing powder paint talking about changes to colours. Children told us about the cakes they were making in the microwave. Providing a range of open ended play experiences inspired children's creativity and imagination.

Staff recognised, celebrated, and shared children's achievements. The learning wall, floor books, and children's learning journals were some of the ways that their progress and development was shared with families. Some families said they would like more information about their children's daily experience and development. They suggested an increased level of sharing information through the diary or by introducing an online App. Staff should continue to develop how they record observations. Good quality observations will support staff to identify and plan for children's next steps in their development. This will support children to achieve their potential.

Children felt a sense of belonging in the local community because it was well used by the service. The beach and the forest provided opportunities for children to explore the world around them. The nursery allotment was being developed to extend children's experiences of planting and growing. Children regularly visited a local care home. They were building relationships with people that lived in the care home, were developing physically when walking to the care home, and enjoyed the bus trip back. Children's health and wellbeing was supported through their community experiences. A parent said, "I think it's a great idea that they have been visiting one of the local care homes."

Areas for improvement

1. Medication recording systems and processes should be developed in line with good practice guidance, 'Management of medication in daycare of children and childminding services.' This will ensure children are kept safe and healthy in the service.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for children, and clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

Children benefited from an environment that was well furnished, comfortable, and homely. Most areas had a calming influence on children through the use of sensory lighting. The layout of the playrooms meant there were interesting spaces that children used creatively through their play or that were set up as restful quiet areas. Children were able to relax and spend time alone or in small groups. The environment promoted children's wellbeing.

Children enjoyed good quality play experiences. The loose parts and authentic and natural resources created a rich play environment that supported children's interests and imagination. A child said they were "making an aeroplane." They had designed the aeroplane and then used the tools at the work bench to make the wooden aeroplane. Risky play experiences supported children to learn about staying safe. Staff reflected on how children used the areas and changed them so that the resources and experiences supported their learning.

Some children benefited from having direct access to the outdoor garden. This supported their choice of being indoors or outdoors. The play rooms for younger children did not have direct access to the outdoor space. However, staff promoted children's choices by ensuring they had regular outdoor play experiences to support their health and wellbeing.

Children were safe because there were effective systems and processes in place. Secure entry door systems, monitoring systems, and daily risk assessments showed that staff were responsible in ensuring the safety of children. The service was at an early stage of using Care Inspectorate's SIMOA campaign to reflect on and review the safety systems and processes in place. Effective infection prevention and control routines included hand washing that was embedded in practice and regular cleaning. Staff protected children by ensuring the environment was clean and hygienic.

To ensure the service continues to develop in line with good practice guidance, the provider should plan to develop the nappy changing facilities. They should consider the guidance, 'Nappy changing for early learning and childcare settings (excluding childminders)' to support any planned improvements. This will ensure that these facilities provide children with a safe, clean environment and appropriate equipment, whilst promoting privacy, dignity, and for older children, independence.

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 improvements are led well

Children and families were made to feel welcome and included in the service. Information was shared with families including policy and procedure. This meant they knew what to expect from their nursery experience. The management team aimed to consult with children, families, and staff to agree the nursery values as part of the improvement plan. The ethos of the service was focused on children learning through play.

Continuous improvement was supported by effective quality assurance systems. The service used best practice guidance 'How good is our early learning and childcare' to support them on their improvement journey. As a partner provider, the service worked with the Local Authority to develop improvement priorities and the action to be taken. Aspects identified as having improved included outdoor learning and family engagement. The staff team were at an early stage in their role in raising standards through reflective practice. Staff should continue to develop ways to build self-evaluation into their working day. This will bring about changes to outcomes for children and families.

Children and families views were actively sought to inform the development of the service. For instance, staff were able to chat with children and families about the quality of their experience in the service through formal and informal meetings. This meant they were meaningfully involved and influenced change in the service. Most families agreed or strongly agreed that they were involved in a meaningful way. This meant they were helping to develop the service, and their ideas and suggestions were used to influence change.

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

Children and families benefited from the consistency of a caring and nurturing staff team. Staff knew children well and delivered a consistency when responding to their individual needs. A shared approach ensured that children and families were supported to achieve their potential. Families commented positively about the staff team describing them as:

"Fantastic"

"Staff are the best"

"Really great staff and managers, they help me all the time"

The management team recognised and valued the importance of ensuring the service was always appropriately staffed. The wellbeing of staff was recognised as a factor in managing staff absence. For example, staff were able to choose to work a four day week and were recognised in small ways for their achievements. Managers were able to provide cover in the playrooms, and some staff had moved with children to different playrooms to maintain consistency of care. The ethos across the team was to value children and families by ensuring their needs were met.

Children were safe because staff were deployed across the service to a good level. In the main, staff communicated well to ensure children were supervised across all areas. A good mix of skills and experience supported staff to work together as a team. This supported the development of staff practice, knowledge, and skills promoting children's safety and wellbeing. The layout of the building for younger children meant there were times when staff found it difficult to get the help they needed. We suggested the use of walkie talkies to support the safety of staff and children at these times.

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 develop children's personal care plans to reflect the needs, wishes, and choices of children and their families. They should consider each child's stage of development and future care and support as well as any other circumstances which may affect a child's learning and development journey. Significant learning and development as well as meaningful next steps should be recorded, and a wide range of additional support needs should be considered when planning for children's holistic wellbeing. These should be reviewed at least once every six months, or sooner if there is any change to a child's care or

welfare. Where children have additional support needs, meetings with parents and other relevant professionals should be held at regular intervals to evaluate progress and set targets.

This is to ensure 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).

This area for improvement was made on 29 August 2019.

Action taken since then

Personal plans were in place for all children. They contained information that reflected the needs, wishes, and choices of children and families. We discussed how personal plans could be further developed.

Previous area for improvement 2

The provider should continue to develop their approaches planning for the under threes, to support children to achieve their potential. Consideration should be given to how children and families can re-visit and share learning and development in a meaningful way. In addition, these should be closely linked to children's progress as they develop and reach key milestones recorded within personal learning journals. Observations within journals should be enhanced to ensure they consistently capture the learning to complete the planning cycle.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 29 August 2019.

Action taken since then

Children under the age of three had a nice experience during our visit. Staff were responsive and interacted with children in a way that supported their needs. A knowledge of child development ensured children were provided with play and learning opportunities that supported their progress. Staff were aware of children's interests and were tuned into children's cues. Learning journals continued to be developed.

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?	4 - Good
4.3 Staff deployment	4 - Good

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