

Flexible Childcare Services - Oldmeldrum Day Care of Children

Meldrum Academy
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Type of inspection:
Unannounced

Completed on:
17 October 2023

Service provided by:
Flexible Childcare Services Scotland
SCIO

Service provider number:
SP2019013370

Service no:
CS2019376992

About the service

Flexible Childcare Services - Oldmeldrum is an afterschool club delivered from Meldrum Academy. Children have access to two classrooms and the outdoor areas of the school during their time at the club.

Flexible Childcare Services - Oldmeldrum was registered in December 2019 to provide a day care of children service to a maximum of nine children attending primary school and secondary school. The manager is also the manager of Flexible Childcare Services (Aberdeenshire) - Inverurie and Flexible Childcare Services (Aberdeenshire) - Stonehaven.

The service operates during term-time on Thursday after school.

About the inspection

This was an unannounced inspection which took place on 12 October 2023 between the times of 15:00 and 18:30. 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 children using the service and four of their parents/carers
- received no responses to our request for feedback from parents via MS Forms
- spoke with staff and management
- received one response to our request for feedback from staff via MS Forms
- observed practice and children's experiences
- reviewed documents.

Key messages

- Children experienced warm, nurturing care and support from staff who knew them well.
- Children were confident and relaxed and had fun.
- Staff were kind, caring and loving in their approach to the children.
- Children and families benefitted from a robust quality assurance and evaluation system which led to improvements.
- Staff were flexible and proactive in their deployment to meet children's needs.

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?	5 - Very 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 benefitted from the positive attachments they had formed with the staff. Interactions between staff and children were warm and nurturing, supporting children's confidence and self-esteem. There was lots of laughter and children were comfortable and relaxed during their interactions with staff. All parents we spoke to were very happy with the care provided. One parent told us, "Staff here get my child, they have the patience and understanding to meet their needs".

Staff knew children well and understood their needs and the strategies in place to support children. This knowledge promoted children's overall wellbeing. Children's privacy and dignity was promoted when staff assisted them in personal care or supported them during discussions.

Children were involved in the planning and preparation of snack. This provided opportunities for children to show their independence, express their choices and practice life skills. Children and staff told us how they had planned the snack for that day, including Halloween cookies. Children were able to prepare their own fruit at snack time and pour their own drinks. If support was needed it was given in ways that supported children's confidence.

Children enjoyed a relaxed and unhurried sociable experience at snack time. Staff sat with children and promoted a social time with lots of chat, supporting children's communication skills.

Children's overall wellbeing was supported by the effective use of personal plans. These included information on children's needs as well as preferences and routines. Staff used this information to support children and provide a continuity of care. Where there were strategies of support in place, these were used consistently and recorded in the personal plans. This supported relief or new staff to know children's needs as well as allowing effective review and evaluation of support in place.

Children's safety was promoted through staff understanding of their role in identifying, recording or referring any concerns they may have. Staff were working well with parents and other agencies to support transitions and a consistent approach to meeting children's needs. This included positive links with the school and, where appropriate, attendance at multi agency meetings.

Staff were knowledgeable about factors which may impact on a child's wellbeing and were confident in how they could support children and families in a variety of situations. Parents told us that they felt staff supported them as well as their children.

Quality Indicator 1.3: Play and learning

Children were having fun and there was a balance of spontaneous and planned activities for them to enjoy. On our visit a Halloween party was taking place and children had been included in planning this. Children's choice was supported as they were able to choose which resources they wished to use each day. Staff

supported them in getting resources from the storeroom and setting them up in the classroom. Staff ensured that each child had the opportunity to express their choices, promoting their feelings of inclusion.

Children were engaged in their activities throughout the session. This included board games, dancing and chats with staff and each other. The board games were used to support children's numeracy skills as well as social interaction and communication. Opportunities to support children's literacy and language skills were softer and centred around interactions with staff and reading the environmental print such as posters and game instructions. Paper, pens and pencils were available for children who wished to write or draw. One child enjoyed writing the results of a discussion around risk assessments.

Staff interactions supported children to participate and to engage in their activities. For example, while playing the game Uno children were encouraged to consider turn taking, game strategy, and to support each other and staff in learning the game.

Staff were responsive to children's interests, supporting them to lead their own play and extending activities. Children were consistently allowed time to consider their responses and participate in discussions, showing that staff were listening to the children.

There were limited observations of children's achievements and experiences. This was partly due to the weekly nature of the service. We suggested that more recording of children's interests and achievements would support the identification of individual next steps or goals. This would further promote children's progression.

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

Staff were welcoming and inviting to children from the very start of their time at the club. The children met in the library and, once all together, then went through to the classroom. Staff could not access the classroom prior to the children arriving. This meant children were involved in the gathering of resources and setting up of the room. Staff made this into a positive, encouraging children to choose what was brought through and how it was set up.

There was limited opportunity to make the room more comfortable and homely. A sensory tent with some cushions and blankets was available. This provided space for children who needed time "away" from the group to rest or participate in quieter activities.

There was no direct access to the outdoors from the classrooms. Staff involved children in planned activities using the school pitches and games areas to extend their experiences. The use of local amenities such as the shop and café further extended children's experiences while supporting them to feel confident in their community.

The rooms were bright and airy with plenty of space to accommodate children's needs and allow them to extend their play. They were well maintained and secure, supporting children's health and safety.

Children's safety was further promoted by the use of risk assessments to record any hazards and detail the

actions taken to reduce the risk they presented. Children's awareness of their own safety was promoted by their involvement in the risk assessments and staff interactions.

Children's health was promoted by the actions taken to reduce the risk of infection. This included wiping surfaces and washing hands (staff and children) at appropriate times. Staff also wore gloves and aprons when serving or preparing food.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 3.1: Quality assurance and improvement are led well

There was a strong leadership of the service which promoted a shared vision that reflected the aspirations of children and their families. Staff felt confident in suggesting changes that would improve the experiences for children. This included recent changes to the snack time which promoted better experiences for children. For example, using the main classroom for snack when they felt this would be more comfortable for children.

Children were able to provide feedback about what they wanted from the service. This then impacted on the activities planned and resources provided. Families were asked for feedback in a variety of ways including questionnaires, digital surveys and parent's meetings. Changes that were initiated from feedback were then communicated to parents. For example, recently changes had been made in the way information was gathered so that parents have fewer forms to complete.

Audits and observations of practice were used as part of the quality assurance processes in place. They included checks of children's records, a review of any accidents or incidents and observations of children's experiences. These were used to identify where changes could be made that would lead to improvement. The manager was enthusiastic when discussing the planned developments and how they were progressing.

An improvement plan detailed the current areas for development. This included snack experiences, personal plans and resources. Within the plan each change had a desired outcome identified which focused on the outcomes for children. There were target dates and reviews recorded to promote progress on the improvements. We suggested that the manager may want to ensure that they acknowledge when an outcome has been achieved and start a new plan of there are further changes that have been identified in the evaluation process. This supports an acknowledgement of achievement and a full evaluation of the impact of the changes.

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's experiences were enhanced by staffs' commitment to their role and positive working relationship with each other. This contributed to a positive welcoming atmosphere with happy and relaxed children and staff.

Staff worked well as a team and knew the children and their needs very well. Overall, the deployment of staff was well-managed. Staff communicated effectively with each other to provide support and guidance for the children when required. This created a calm, nurturing environment where staff met children's needs. However, one child had been assessed as requiring one to one support. We suggested consideration should be given to ensure there is enough staff to provide this should there be an emergency. For example, if all children were attending and a staff member was supporting a child away from the group, this could leave three children with one staff member. At times this may include a child who requires one to one support.

Children were encouraged to make choices and lead their play by staff who were flexible to meet their needs. Staff were proactive in recognising where they were needed and consistently met the needs of the children during the session. For example, they joined children at activities, provided reassurance and encouragement and always interacted in a lovely manner. Staff had formed trusting and positive relationships with each other, children and parents supporting consistency and continuity of care for the children.

Staff valued the support of management. Individual and group meetings provided staff the opportunity to share experience and knowledge of individual children and agree strategies to meet their needs. Additional training was identified during these meetings to ensure staff were competent in supporting children. One member of staff told us how they were looking forward to attending training in Makaton (a sign language to support communication). Staff were encouraged to reflect on the impact of training on outcomes for children. This promoted an environment where children's safety and wellbeing were at the forefront of decision making.

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 promote positive experiences and outcomes for children the self-evaluation and quality assurance processes should be embedded into practice. The provider and manager should continue to develop ways to gather and reflect the views of children and families in this.

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 a robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 9 January 2023.

Action taken since then

A new format for self-evaluation has been implemented and embedded into practice. This is identifying areas for improvement which are being included in the development plan. Outcomes are being monitored and have shown improvements are being achieved which impact positively on children's experiences and outcomes.

This area for improvement has 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.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	5 - Very 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?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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