

Crossford Playgroup Day Care of Children

The Village Hall Main Street Crossford Dunfermline KY12 8NJ

Telephone: 07826 355554

Type of inspection: Unannounced

Completed on: 20 September 2023

Service provided by: Crossford Playgroup

Service no: CS2003006992 Service provider number: SP2003001606



About the service

Crossford Playgroup is situated within a residential area of the West Fife village of Crossford. It is close to local amenities including shops, woodlands, parks and the local primary school. The service provides early education and childcare for a maximum of 24 children aged 2 years 6 months to an age to attend primary school. The outdoor play area should only be accessed under adult supervision after the safety gates are secured at both sides of the building.

The accommodation is provided from the village community hall where they have use of a large hall space and access to a cloakroom area and toilets. There is also an enclosed outdoor garden/play area.

About the inspection

This was an unannounced inspection which took place on 14 September 2023 between 09:30 and 14:00 and was completed on 20 September 2023. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- Spoke with eight children using the service
- We gathered feedback from three parents
- Spoke with management, provider and staff members
- Observed practice
- Reviewed relevant documents

Key messages

- Children were happy, busy and enjoyed positive relationships with staff allowing them to feel nurtured and valued.

- Review of play spaces and planning was enhancing children's play and learning experiences.

- The service demonstrated commitment to improvement which had led to changes contributing to children's positive wellbeing.

- The deployment of staff and teamwork supported children's safety through appropriate supervision.

- Personal plans including journals should continue to be developed and kept under regular review to meet children's individual needs.

- Further attention to medication and hazardous materials is needed to support children's continued safety and wellbeing.

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?	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? 3 - Adequate

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

Quality indicator 1.1; Nurturing care and support.

Children enjoyed positive interactions which enabled them to feel confident and comfortable. Staff were kind, caring and respectful, which promoted children's sense of security. One parent told us "I found them (staff) to be warm, welcoming, and put people at ease. My child loves (name given) who works there and although they haven't really seen them since June, they still speak about how much they like her and how she is their favourite."

Children's privacy and dignity was maintained through improved approaches to toileting and nappy changing. The promotion of children's awareness to close toilet doors and staff efforts to manage the limitations of the building, improved respectful personal care. We asked the service to continue to monitor this and review their guidance to support it.

The relaxed and social experience of mealtimes meant children were unhurried and able to enjoy their food. Children's allergies were managed well contributing to their continued wellbeing. Management had identified the need to increase opportunities for children's involvement in the preparation and self-serving of meals and snacks. This would promote children's independence and understanding of where food comes from.

Children were supported well to explore and express their emotions. Specific books and emotion spoons helped them to recognise their feelings and encouraged them to share these with staff and each other. This promoted a sense of value and being listened to. The service should now continue to enhance opportunities to support children to understand their emotions.

Children's care and support was not always supporting their needs. Staff were not consistently using information provided by parents on 'all about me' forms. This limited their knowledge of children's individual preferences and any support required. This prevented planned approaches and the delivery of strategies to meet children's needs, including where children have additional support needs. The service needs to ensure they use information provided and identify where additional support is needed. There should be clear strategies for support in place, which are kept under regular review with parents. All staff should be fully aware of these to support consistency of care and support. This is to enable children with any identified support needs to succeed. The area for improvement made at the last inspection has been made again (see area for improvement 1).

Personal plan information and personal learning journals were sent home with parents regularly. This provided opportunity to review these with their children. However, this often meant that information on children's' learning was not held in the setting for periods of time. The service should consider how this is managed in order to keep journals and personal plan information under regular review and consistently capture children's development and learning (refer to area for improvement 1).

There was a risk of harm to children due to unclear recording of some medication. Whilst forms captured a general time when parents had provided a dose in the morning this was not always confirmed by staff when children arrived. This meant there was potential for medication to be administered sooner than prescribed (see area for improvement 2).

Quality Indicator 1.3; Play and learning.

We evaluated this quality indicator as good where several strengths impacted positively on outcomes for children/people and clearly outweighed areas for improvement.

The pace of the day was relaxed with smooth transitions between play and meals, supporting children's enjoyment and sense of security. This reduced interruptions to children's play and increased their choice and ownership.

Children were having fun and enjoying a range of experiences which supported their current and emerging interests. These provided children with some challenge and opportunity to be creative. The service should now continue to enhance these experiences, for example developing large loose parts play materials indoors and outdoors. This would boost children's natural curiosity and enhance focus and engagement.

The skilled interactions of staff meant children were supported to problem solve and become independent. Responsive planning was beginning to support children's emerging interests, enhancing and extending children's learning. Planning should continue to be developed to make consistent links to PLJ's and planning for individual needs. Staff promoted numeracy very well throughout interactions. They should now consider how they can further enhance children's language, and literacy within play experiences.

Personal learning journals were in place for all children which captured some of their achievements and progress. These contained observations and photographs demonstrating children's breadth of learning experiences. These should now be developed further to improve the quality of observations to capture the learning. The service had identified this as an area for improvement. Staff were currently being supported by the local authority to develop their skills in writing quality observations. Management should regularly monitor the quality of observations and next steps. This is to ensure the information supports planning of relevant play and learning experiences. This would enable provision of activities tailored to the needs and abilities of individual children and support them to be successful learners.

Areas for improvement

1.

To promote children's continued learning, development and enjoyment in the service, the provider should ensure that plans are in place to support children with additional support needs including those with English as an additional language. Personal plans should be held which take account of individual needs. These should identify appropriate strategies which all staff should be aware off to support consistent practice and enhance children's outcomes. All personal plan information should be kept under regular review. This includes review of children's continued development and learning and identification of relevant next steps.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'I am supported to achieve my potential in education and employment if this is right for me.' (HSCS 1.27) and 'My future care and support needs are anticipated as part of my assessment. (HSCS 1.14).

2. To support children's continued wellbeing, the provider should ensure the clear recording of information on medication forms to support appropriate administration. This is to prevent accidental overdosing of medication to children.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (4.14).

How good is our setting? 4 - Good

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

Quality indicator 2.2; Children experience high quality facilities.

Children were enjoying improved access and quality of play due to a review of playroom layout. Children had been consulted on the changes, ensuring they had some control over their play space. This demonstrated that children mattered and their voices were valued.

Children benefitted from an inviting, homely and comfortable environment. The playroom was bright and well ventilated contributing to children's comfort. Respectfully displayed art work throughout the playroom contributed to children's sense of belonging.

Children's risk of leaving the service unnoticed was reduced due to the robust management of door security when families enter and leave the premises. High gates outside were locked, enhancing security within the garden, along with close supervision by staff. This contributed to children's continued safety without impacting on their freedom of movement.

Relevant training should be accessed by staff who are preparing and serving hot food. A policy and procedures around the management, storing and serving of food should be developed and appropriate equipment used. For example, a temperature probe should be used to ensure food is heated to the correct temperature prior to serving. This would reduce children's risk of cross infection.

Information held on children was stored securely, limiting unauthorised access and maintaining children and families confidentiality.

Robust risk assessments were held which identified potential harm to children and actions to be taken to reduce these. However, we found there was potential for harm to children through access to hazardous and unknown materials. Within the bathroom, cleaning materials were stored on a shelf above the toilet. There was a possible risk of children accessing these by climbing onto the toilet. There was a risk of children accessing these by climbing onto the toilet. There was a risk of children accessing these by climbing onto the toilet. There was a risk of children accessing these by climbing onto the toilet. There was a risk of children accessing these by climbing onto the toilet. These hazards were identified during the inspection and were not addressed until the third day for feedback. This posed a risk to children's continued wellbeing. Monitoring systems need to be developed to ensure that staff aware of and follow actions identified within risk assessments to support children's continued safety (see area for improvement 1).

Areas for improvement

1. To support children's continued safety and wellbeing, all staff should be fully aware of risk assessments in place. Regular monitoring by the person in charge along with vigilance and action by staff in regard to the management and storage of hazardous materials should be maintained to reduce children's risk of harm.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "my environment is safe and secure." (HSCS 5.17).

How good is our leadership? 4 - Good

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

Quality indicator; 3.1; Quality assurance and improvement are led well.

Children's care and support reflected current aims and goals for the service. Most staff demonstrated a clear understanding of these, and they were communicated well to parents. Families were able to influence the aims through general discussions, social media, and committee meetings. There was a shared vision of what was important in the service which included a commitment to providing high quality play experiences. This meant children benefitted from a service committed to improving their outcomes.

Children and families were beginning to have more influence over the service through improved consultation. Observations of children and discussions helped to gather their views. Parents were able to provide their thoughts through the use of a suggestions box. One parent told us "The manager has been great so far in keeping the Playgroup going and I have seen the suggestions box out every day to put forward any suggestions or concerns." Further opportunities for formal feedback should now be developed and used to drive continuous improvement.

Quality assurance systems had been developed by the new manager and staff team which contributed to improved outcomes for children. As a result, the service had made a number of improvements following the previous inspection. The commitment to addressing issues had led to all previous requirements and most areas for improvement being met. This meant children experienced improved care and support. The service should continue to embed changes made and identify further improvements through regular self-evaluation as a whole team. This should include developing a system of monitoring and use of best practice documents. This would help to quickly identify and address any issues, drive improvement and support children's wellbeing (see area for improvement 1).

On arrival at the service, there was some confusion regarding who the person in charge was, in the absence of the manager. The service should ensure that there are clear lines of accountability and a shared knowledge of the manager's days of attendance. This is to support families confidence and the smooth operation of the service (see area for improvement 2).

Areas for improvement

1. To support continuous improvement and positive outcomes for children, the provider should continue to develop and embed quality assurance systems. This should include a programme of regular direct monitoring and self evaluation by the whole team and use of relevant best practice documents.

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).

2. To support the smooth operation of the service, the provider should establish clear clear lines of accountability and responsibility in the absence of the manager and an understanding of defined roles and responsibilities. This is to support the leadership and quality assurance of the service.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard 3.19 which states "My care and support is consistent and stable because people work together well".

How good is our staff team?

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

4 - Good

Quality indicator 4.3; Staff deployment.

Positive relationships between the staff team supported their communication to meet children's needs. Staff moved fluidly in response to children's requests, such as for outdoor play. They positioned themselves appropriately for maximum supervision both indoors and outside. This contributed to children remaining safe.

Management of staff was planned to ensure appropriate staff to child ratios at all times. Staff worked a range of different shifts and were aware of the impact of unplanned absences. As a result they were flexible and used a communication book to share relevant information over the week. This supported some consistency of care for children. We asked the manager to consider review of the staff rota to better support the keyworker system.

Children's play experiences were enhanced through staff sharing their own personal skills and interests. For example, one staff member actively promoted singing with children throughout the day. Also, drama and role play within nursery had been developed along with the addition of extra materials to support STEM (Science, Technology, Engineering and Maths) from a staff member. This increased children's enjoyment in their play.

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

Requirements

Requirement 1

By 31 August 2023, the provider must ensure that medication provided by parents is appropriately recorded and stored in line with current guidance and outwith children's reach. Where required, flow charts should be in place to management any escalation of treatment. All staff should be aware of the medication needs of children to enable them to meet their wellbeing needs.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that "Any treatment or intervention that I experience is safe and effective." (HSCS 1.27). It is also necessary to comply with Regulation 4(1)(a) (Welfare of users) of the Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 31 March 2023.

Action taken on previous requirement

Medication forms, policy and procedures had been reviewed and updated. Medication brought into the setting was clearly labelled and asthma plans were in place. All medicines were now stored within a box on the stage area and parents informed of procedures for receiving this into the setting. We reminded the service to ensure that the box is secure and inaccessible by children at all times. We recognised improvements made and gave advice for some further changes which the service had begun to address during the inspection. Therefore this requirement is now met with a new area for improvement made in relation to medication forms fully capturing relevant information on times of administration. See quality indicator 1.1.

Met - within timescales

Requirement 2

By 30 June 2023, the provider must develop effective procedures for the recording and reporting of child protection concerns. This includes ensuring the policy and procedures are up to date and understood by all staff and identifying a named child protection officer. This is to support effective safeguarding of children.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard 3.20 which states "I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities". It is also necessary to comply with Regulation 4(1)(a) (Welfare of users) of the Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 31 March 2023.

Action taken on previous requirement

A clear child protection policy was now in place. All staff were alert to signs and symptoms of possible abuse. This requirement is now met with advice that staff refresh themselves with the policy to increase confidence in addressing safeguarding concerns.

Met - within timescales

Requirement 3

By 31 August 2023, the provider must ensure acceptable standards for hygiene and infection prevention and control are in place at all times. This includes ensuring appropriate cleaning is carried out, the hygienic storage of materials within the nappy change area and the provision of appropriate bins. Procedures must be implemented to comply with Health Protection Scotland's guidance 'Infection Prevention and Control in Childcare Settings (Daycare and Childminding settings)'. All staff must also carry out effective handwashing and support children to regularly and effectively wash their hands throughout the day. This is in order to ensure children are cared for in an appropriate, clean and hygienic environment.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard 4.11 "I experience high quality care and support based on relevant evidence, guidance and best practice".

It is also necessary to comply with Regulation 4(1)(a) and (d)(Welfare of users) of the Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 31 March 2023.

Action taken on previous requirement

The storage of materials within the nappy changing area had been enhanced, reducing the risk of cross infection. Hand washing by children and staff was improved and additional measures around the infection prevention and control around the setting were in place. Staff had also undertaken relevant training to support their practice. This requirement is now met.

Met - within timescales

Requirement 4

By 4 September 2023, the provider must ensure children experience positive outcomes and appropriate levels of care and support by developing and embedding effective and continuous evaluation and quality assurance systems. This must include as a minimum, appropriate action plans which are understood by the whole team, direct monitoring, self evaluation and use of quality assurance tools and best practice documents.

This is to comply with Regulation 4(1)(a)(b) and (d) (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 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 requirement was made on 31 March 2023.

Action taken on previous requirement

We saw significant progress in developing a quality assurance system which included an improvement plan for the year, a calendar to support continuous quality assurance and opportunities for parents and staff to provide their views. These were still at the early stage of implementation and should now be developed further and embedded through ongoing reflection. This requirement has therefore been met with a new area for improvement identified within quality indicator 3.1.

Met - within timescales

Requirement 5

By 30 June 2023, the provider must employ a manager who has the skills, knowledge and experience necessary for managing the service. This includes notifying the Care Inspectorate of any change of manager. This is to ensure children receive high quality care which protects and promotes their rights and wellbeing.

This is to comply with Regulation 7(2)(c)(Fitness of manager) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; "I use a service and organisation that are well led and managed" (4.23).

This requirement was made on 31 March 2023.

Action taken on previous requirement

A new manager was now in place and all relevant notifications to the Care Inspectorate had been completed. This requirement is therefore met.

Met - within timescales

Requirement 6

By 30 June 2023, the provider must ensure effective deployment of staff to support continued supervision to maintain children's safety indoors and in the garden.

This is to comply with Regulation 4(1)(a)(b) and (d) (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 which state that: 'My needs are met by the right number of people' (HSCS 3.15) and 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This requirement was made on 31 March 2023.

Action taken on previous requirement

Staff remained aware of children's whereabouts and deployed themselves well to support children's choice of where to play, supporting supervision. Conisstent communication between staff enabled monitoring of children and supported their freedom of movement.

Met - within timescales

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 practices are improved in order to support and maintain children's privacy and dignity especially during nappy changing and toileting. This is to enable prompt and dignified responses to children's personal care needs.

This is to ensure that care and support is consistent with the Health and Social Care Standard 1.4 which states "If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected". (HSCS 1.4)

This area for improvement was made on 31 March 2023.

Action taken since then

The service had taken appropriate action to improve privacy and dignity during toileting and nappy changes. This included designated toilets for specific functions, closing main corridor doors and encouraging and supporting children to close toilet doors. This area for improvement is therefore met.

Previous area for improvement 2

The provider should ensure that plans are in place to support children with additional support needs including those with English as an additional language. Personal plans should be held which take account of individual needs and are kept under regular review. These should identify appropriate strategies which all staff should be aware off to support consistent practice and enhance children's outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'I am supported to achieve my potential in education and employment if this is right for me.'(HSCS 1.27) and 'My future care and support needs are anticipated as part of my assessment. (HSCS 1.14).

This area for improvement was made on 31 March 2023.

Action taken since then

We acknowledge ongoing work with support from the local authority to make the identified improvements to the personal plans that are required. However, these were often taken home for extended periods, meaning limited information was held in the service. It was therefore unclear what strategies were in place for children who required additional support. There was also inconsistency in the review of plans. This area for improvement is therefore not met and has been made again.

Previous area for improvement 3

The provider should ensure that children's development and learning are consistently captured within personal learning journals to evidence progress along with identifying relevant and meaningful next steps.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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' (HSCS1.15).

This area for improvement was made on 31 March 2023.

Action taken since then

We recognised that the service have identified this as a priority for improvement within their current improvement plan. Staff were accessing training to support them in developing written observations of children's learning. This should continue to be developed and monitored. Due to the management of sharing children's folder with parents, some were not updated for some time. This area for improvement is therefore met with reference to area for improvement 1 within quality indicator 1.1 in regard to regular review of all information held on children.

Previous area for improvement 4

The provider should develop formal opportunities to gather parents/carers views on all aspects of provision to provide them with opportunity to influence the service and support ongoing evaluation and improvements.

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 31 March 2023.

Action taken since then

Positive action had been taken to provide some opportunities for parents to give their views, such as use of a suggestions box, social media and daily discussions. This area for improvement is therefore met with advice to continue to develop additional ways to support parental feedback.

Previous area for improvement 5

The provider should review, update and improve the playgroup's policies and procedures to ensure these accurately reflect the service.

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

This area for improvement was made on 31 March 2023.

Action taken since then

The management team were working together to update all policies and adopt those of Early Years Scotland to match the service provided. This area for improvement is therefore now met.

Previous area for improvement 6

The provider should ensure appropriate staffing to meet the needs of children present. Staff rota's should be reviewed to ensure that keyworkers are available to support children during times of transition and to meet their emotional needs.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that " My care and support meets my needs and is right for me."(HSCS 1.19) and 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This area for improvement was made on 31 March 2023.

Action taken since then

Deployment of staff over the week meant that there was improved staff to child ratios. This enabled staff to provide support to meet children's immediate needs and overall supervision. This area for improvement is therefore 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?	3 - Adequate
1.1 Nurturing care and support	3 - Adequate
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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