

# Care service inspection report

## **Weans World Nursery**

### Day Care of Children

2a Hallhill Road  
Johnstone  
PA5 0SA

Type of inspection: Unannounced

Inspection completed on: 30 September 2014



HAPPY TO TRANSLATE

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### **Service provided by:**

Weans World (Johnstone) Ltd.

### **Service provider number:**

SP2003003394

### **Care service number:**

CS2008170087

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of Care and Support	1	Unsatisfactory
Quality of Environment	3	Adequate
Quality of Staffing	2	Weak
Quality of Management and Leadership	1	Unsatisfactory

### What the service does well

Overall, staff are kind and caring in their interactions with children.

### What the service could do better

The provider must ensure that the requirements and recommendations made at this inspection are addressed. The requirements relate to:

- reviewing and updating the administration of medication practice and policy
- making sure that all children have personal plans that reflect their individual needs
- improving risk assessment processes to ensure a safe environment
- developing effective quality assurance systems including providing opportunities for staff to meet on a regular basis

Details of these issues and the associated recommendations and requirements are contained in this report.

## What the service has done since the last inspection

At the last inspection we made six requirements. The provider had taken some action relating to some of these requirements. However, the Provider had not met any of these fully within the timescales that we set, or within those that the provider identified in the action plan she provided following the previous inspection. We have reported on these requirements, and any progress made, within the relevant Quality Statements throughout this report.

## Conclusion

The Provider was not ensuring that children had a good enough standard of care. The Provider needs to take prompt and significant action to make and sustain improvements to this service. The requirements and recommendations in this report should be the basis from which these improvements are made.

Overall, children have good relationships with staff. However, the Provider had recently moved some staff into different rooms. This meant that in some instances, staff needed to do more to understand and respect children's individual needs and to develop responsive and nurturing relationships with the children in their care.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at [www.scswis.com](http://www.scswis.com).

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011

## Requirements and recommendations

If we are concerned about some aspects of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made.

Requirements are legally enforceable at the discretion of the Care Inspectorate.

This Daycare of Children Service is currently registered to provide care for a maximum of 46 children, aged between six weeks of age to those who are not yet attending primary school. The service is managed by the provider and operates from a converted church building within the Johnstone area of Renfrewshire. The accommodation offers three playrooms which can be used flexibly to meet the needs of the children attending. An outdoor play area is available at the front of the building which is split into three sections, one for each age group of children.

The nursery aims to provide a top quality service, in a safe, happy and comfortable environment placing emphasis on the social, emotional and educational welfare of each child as an individual.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of Care and Support - Grade 1 - Unsatisfactory**

**Quality of Environment - Grade 3 - Adequate**

**Quality of Staffing - Grade 2 - Weak**

**Quality of Management and Leadership - Grade 1 - Unsatisfactory**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

### What we did during the inspection

We wrote this report following an unannounced inspection of the service, which was undertaken between 11am and 4.15pm on Tuesday 30 September 2014. The inspection was carried out by two inspectors for the Care Inspectorate.

The purpose of this inspection was to establish what progress the service had made in meeting the requirements outstanding from the last inspection on 13 May 2014. We did not focus on progress made against recommendations made during the previous inspection. We have however reported where progress, or a lack of progress, against these was apparent. The outstanding recommendations and the reasons that we made these are detailed within the relevant sections of this report. We did not issue the service with questionnaires to distribute to parents for this inspection.

During this inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- the provider, who is also the manager
- eight staff
- twelve children

There were twenty four children present during our inspection. We observed how all of the children spent their time and observed how staff worked with and cared for the children.

We looked at:

- Information for parents
- Information on parents' participation
- The complaint procedure
- Medication information and consent forms
- Risk Assessments
- Children's personal plans
- Accident and Incident records

- Registers of children and staff
- Information on infection control
- Certificate of Registration
- Certificate of Insurance
- Information on quality assurance
- The environment and equipment

### **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

### **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

### **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firelawscotland.org](http://www.firelawscotland.org)

### **What the service has done to meet any requirements we made at our last inspection**

#### **The requirement**

The provider must ensure each child's personal plan is completed with all relevant information. This includes meaningful observations and identified next steps to support children's individual needs. Each child's plan must be reviewed with the parents at least once in every six month period. This is in order to comply with The Social Care and Social Work Improvement (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210), regulation 5(1)(2). A requirement that a provider must prepare a written plan for each child. Timescale: 31 July 2014

#### **What the service did to meet the requirement**

The provider had not ensured that each child's personal plan was completed with all relevant information. Please refer to Quality Theme 1, Statement 3.

**The requirement is:** Not Met

### **The requirement**

The provider must carry out a review of staff practice in line with the medication policy and procedure, to make sure medication is appropriately stored, administered and recorded. The provider must ensure that parents complete consent forms detailing all arrangements regarding their child's medication before staff administer medication. The consent and dosage form should be reviewed to make sure that all of the information, as detailed in the medication policy, is recorded. The manager must make sure all staff are familiar with and follow the administration of medication policy and procedure, in order to maintain children's safety and wellbeing. This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 4(1)(a). Timescale: 24 hours from receipt of this report, the provider must send us confirmation that this requirement has been addressed.

### **What the service did to meet the requirement**

The provider had amended the medication recording forms. However, there was no evidence of suitable arrangements to ensure that all staff were familiar with the medication policy and procedure and medication recording systems needed further development. Please refer to Quality Theme 1, Statement 3.

**The requirement is:** Not Met

### **The requirement**

The provider must ensure that staff access appropriate training so that they have the right skills and knowledge to meet children's needs. This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 September 2014

### **What the service did to meet the requirement**

The provider had arranged for a training company to meet with staff and told us that training would be provided soon. A date for this had not yet been arranged. Please refer to Quality Theme 3, Statement 3.

**The requirement is:** Not Met

### **The requirement**

The provider must ensure that there are appropriate arrangements for ensuring that staff are familiar with and implement national initiatives and current best practice. This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 September 2014

### **What the service did to meet the requirement**

Please refer to the information regarding action taken against Requirement 3 and Quality Theme 3, Statement 3.

**The requirement is:** Not Met

### **The requirement**

The provider must review and improve the current arrangements for ensuring that staff have an appropriate awareness and understanding of the service's policies and procedures. This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 September 2014

### **What the service did to meet the requirement**

The provider did not evidence how she ensured that that staff have an appropriate awareness and understanding of the service's policies and procedures. Please refer to Quality Theme 3, Statement 3 and Quality Theme 4, Statement 4.

**The requirement is:** Not Met

## **The requirement**

The provider must develop a robust system to effectively monitor and evaluate the quality of work of each staff member and the service as a whole. Consideration should be given to the resources and personnel required for this task to ensure that it is achievable. In addition, the provider must ensure that staff have regular opportunities to meet as a team. These meetings should have a clear improvement agenda and demonstrate how staff are involved in developing, monitoring and evaluating the service. All staff should have clear roles and responsibilities for developing the service. This is in order to comply with The Social Care and Social Work Improvement (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210), Regulation 3, Principles. Timescale for implementation: 30 October 2014.

## **What the service did to meet the requirement**

The provider had not developed a robust system to effectively monitor and evaluate the quality of work of each staff member and the service as a whole. Please refer to Quality Theme 4, Statement 4.

**The requirement is:** Not Met

## **What the service has done to meet any recommendations we made at our last inspection**

We did not specifically consider recommendations outstanding as part of this inspection process. We have however reported where evidence of this was apparent during our inspection.

## **The annual return**

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

We did not ask the provider to update the Self Assessment as part of this inspection process.

### **Taking the views of people using the care service into account**

Whilst some children were quite happy within the service, some were bored and were not interested in the resources, activities and experiences offered. Children's interests and requests, for example to go outside to play or to be able to read a book, were not met.

### **Taking carers' views into account**

We did not access carers' views as part of this inspection as the purpose of the inspection was to consider progress against outstanding requirements.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 1 - Unsatisfactory

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

We found the service had an adequate approach to involving children and families in assessing and influencing the quality of care and support provided.

We gathered evidence from discussions with children and parents, observing the children at play and information from the provider and staff.

We found the service involved children and parents and asked for their views, about the quality of care and support, using the following approaches:

- daily discussions with parents when they either drop off and collect their child to share information about their child's particular needs for that day
- some discussion with children to ask what they wanted to do
- parents notice boards and displays with some information about what children had been doing and had achieved
- questionnaires issued to parents who use the service
- telephone communication with parents, where appropriate, to keep the parents up to date with what their child is doing.

We found, through discussion with the staff team, that they respected parents' comments and wishes regarding their child's particular needs. Different strategies had been put in place to support children and their families. This meant that overall, staff were able to meet children's individual needs.

Staff used daily sheets for the youngest children to record important information such as what they were doing each day and when and for how long they had slept.

Some parents also used this as a means of sharing information with staff. This helped staff to be responsive to children's care needs.

The Provider had issued parents with information about proposed staffing changes and invited their comments regarding this. The Provider had also given information about proposed changes to the snack and lunch menu, and had invited comments about this. This can help ensure parents feel involved with the development of the service.

### **Areas for improvement**

The provider acknowledged that the service had not maintained previous levels of parental participation through parents' evenings or by sharing information about their children's progress through their profiles. This resulted in the parents not having regular formal opportunities to comment on the range of experiences their children had, or to be involved in deciding next steps in learning. See recommendation 1.

In our previous questionnaires, one parent disagreed that the service had involved them in developing the service and one felt that this was not applicable. We discussed with the provider how the participation policy could be developed to accurately reflect the ways that children's and parent's views would be accessed and how these would help develop the service. See recommendation 2.

Staff planned the topics for children to learn about a year in advance. This meant that there was limited potential for staff to be responsive to children's individual needs and interests. We found during our inspection that some children were not challenged by, or interested in, the activities that were planned for them. This can hinder opportunities for children to realise their potential and to be fully engaged in their learning. See recommendation 3.

As reported as a strength, the Provider had consulted with parents about staffing and menus. However, the information given to parents was not sufficient for them to make informed choices. Examples of this were that the sample menu did not make it clear that some foods were tinned, and therefore contained high levels of salt, or that staff had not yet received training to enable them to provide appropriate care and experiences for children in different age ranges. In addition, the Provider told parents in August that there was a range of training planned over the next three months. At the time of our inspection at the end of September, none of this had taken place and staff were not sure when it was planned for. We discussed with the Provider the importance of sharing accurate and relevant information with parents.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 3

## Recommendations

1. The provider should introduce systems to regularly involve parents and children in the development and improvement of the service in relation to care and support; the environment; staffing; and management and leadership.

National Care Standards Early Education and Childcare up to the age of 16 years.  
Standard 13: Improving the service.

2. In partnership with staff and parents the provider should develop a policy on how children's and parents' views would be asked for in relation to the development of the service. This should include information about how any comments and suggestions made, and action planned, will be shared with parents.

National Care Standards Early Education and Childcare up to the age of 16 years.  
Standard 13: Improving the service.

3. The provider should review and improve the current planning arrangements to ensure that children's interests and preferences are reflected. The provider should ensure that staff have appropriate training and support to enable them to take this forward.

National Care Standards Early Education and Childcare up to the age of 16 years.  
Standard 5, Quality of Experience.

## Statement 3

We ensure that service users' health and wellbeing needs are met.

### Service strengths

We found the arrangements for ensuring children's health and well-being were unsatisfactory. We focussed on:

- personal information and plans
- medication system and records
- infection control methods
- accident and incident records

Parents had completed child application forms, detailing personal information about their child. This included information about allergies and any health issues. In the sample of records that we looked at, we found overall children's personal details were recorded and available to staff. This meant that staff had access to important information about the children. We found that the service was in the process of carrying out a review of this information.

Staff confirmed that they were aware of the importance of discussing children's individual likes and dislikes and personal preferences and interests with parents. We found that overall staff were knowledgeable about the children's individual care needs.

The provider had developed a policy on the administration of medication which took account of best practice guidance. The policy gave staff and parents information about how medication would be stored and administered.

We found the service had systems in place for recording accidents and incidents. This information was collated each week to provide an overview of all the accidents and incidents in the nursery. Where needed, additional steps were taken to minimise the risk of any accidents or incidents being repeated. In the sample of records we looked at we found parents had signed these. This resulted in the parents being kept informed of any issues.

We highlighted in our previous inspection report that snacks and jugs of drinks were left uncovered in the playrooms for some time before children accessed them. We saw during this inspection that these were now covered, which meant that they were protected from germs and dust in the air.

### Areas for improvement

We made a requirement in our previous inspection report that the provider should ensure each child's personal plan is completed with all relevant information. The timescale for this requirement was 31 July 2014.

In the sample of plans that we looked at we found the following issues:

\*There was insufficient information recorded about how staff should manage children's particular health needs. We highlighted in our previous inspection report that there was insufficient information about symptoms that staff should be vigilant about or what to do if children displayed these. We found that there was now more information recorded about the symptoms that children might display, but no readily available information for staff about what to do if these symptoms occurred. Staff who were caring for children with specific health needs told us they would not know what to do if children displayed these symptoms.

\*There were no meaningful observations or next steps recorded for children. We saw that some children, particularly within the room for children aged three to five years, were not provided with appropriately challenging or stimulating experiences. This resulted in children becoming bored and frustrated. Within the rooms for children aged under three years, staff did not have a sound knowledge about how children in this age range learn and develop. This meant that they were not always providing a good enough range of experiences or a suitably stimulating, comfortable and nurturing environment. See Requirement 1.

We made a requirement in our previous inspection report that the provider must carry out a review of staff practice in line with the service's medication policy and procedure, to make sure medication is appropriately stored, administered and recorded. The Provider was unable to provide us with evidence of this review, and staff told us that they had not been given further training on managing medication. We found that some improvements had been made to medication recording systems, however these needed to be further developed to ensure that parents clearly state the required dosage times and amounts, and then staff clearly record how much they have given and when. We asked the Provider to provide us with a copy of the service's guidance for staff on the medication procedure as this was not available during our inspection. At the time of writing this report we had not yet received this. See requirement 2.

We made a recommendation in our previous inspection report that the provider should provide appropriate bedding for children to sleep comfortably. We highlighted that ensuring children had their own bedding, or if shared that this was washed after every use would help limit the risk of the spread of infection. During this inspection we saw that children slept on plastic beds without sheets or pillows. Staff told us that these had been purchased, but that they were no longer available and staff did not know where they were. See recommendation 1

**Grade awarded for this statement:** 1 - Unsatisfactory

**Number of requirements:** 2

**Number of recommendations:** 1

## Requirements

1. The provider must ensure each child's personal plan is completed with all relevant information. the plans should:
  - Include clear information for staff to ensure that they can manage children's particular health needs and know when to access emergency treatment for children.
  - Include meaningful observations and identified next steps to support children's individual needs.
  - Be reviewed with the parents at least once in every six month period.

This is in order to comply with The Social Care and Social Work Improvement (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210), regulation 5(1)(2). A requirement that a provider must prepare a written plan for each child. Timescale: 30 October 2014.

2. Procedures for the use, storage and administration of medication should be improved to maintain children's safety and wellbeing. In order to achieve this, the provider should:
  - make sure medication is appropriately stored, administered and recorded
  - ensure parents complete consent forms detailing all arrangements regarding their child's medication before staff administer medication
  - review the consent and dosage form to make sure that all of the information, as detailed in the medication policy, is recorded
  - ensure all staff are familiar with and follow the administration of medication policy and procedure

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 4(1)(a). Timescale: 24 hours from receipt of this report, the provider must send us confirmation that this requirement has been addressed..

## Recommendations

1. The provider should ensure appropriate blankets and pillows, where appropriate for children's age, are provided for children to sleep. This will help provide a comfortable and nurturing experience for children.

National Care Standards Early Education and Childcare up to the age of 16 years. Standard 3, Health and Well Being.

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 3 - Adequate

### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

### Service strengths

We found that the service had adequate practice in involving service users and carers in assessing and improving the quality of the environment. Please refer to Quality Theme 1, Statement 1.

### Areas for improvement

Please refer to Quality Theme 1, Statement 1.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 2

We make sure that the environment is safe and service users are protected.

### Service strengths

As previously stated this inspection focused on assessing how the service had progressed the requirements we made in our previous inspection. The recommendations and text are outstanding from the previous inspection.

We found the service was adequate at ensuring the environment was safe and service users were protected. Not all parts of this statement were assessed during this inspection. We focussed on the following core activities:

- repairs log and maintenance records
- risk assessments
- infection control
- insurance certificates

The service had sole use of the premises. A secure entry system was in place on the front door. Staff opened the door to visitors, which helped prevent any unauthorised people entering the premises. Employer's liability insurance was in place and up to date.

General risk assessments were in place for the premises and staff completed daily checklists to help ensure the environment was safe.

The service has reviewed and improved its systems to limit the risk of the spread of infection over the past few years. Staff were familiar with current best practice. They wore appropriate gloves and aprons when changing children and followed the service's nappy changing policy. We found during our previous inspection that the temperature of the hot water within the children's toilets was too hot for children to wash their hands comfortably. We found that this had been addressed during this inspection. We saw that staff effectively promoted hand-washing amongst children to help them learn about personal hygiene.

### Areas for improvement

We found that although risk assessments for the premises were in place, these had not been updated to take account of any changes to the environment. Staff were not routinely involved in reviewing risk assessments. This meant that staff were not clearly informed of the potential risks and the measures that would be put in place to reduce these risks. We found that there were a number of areas that had not been risk assessed, these included:

- the security on the front door
- the location of coat pegs in the area leading to the baby room (which were at some

children's eye level)

- the new outdoor climbing apparatus

The risk assessments for outings in the local area did not include enough information about potential risks to children's safety. This meant that staff were not being alerted to any possible risks before taking the children on outings. See recommendation 1.

There was no formal system for recording any repairs that were needed and there was not an on-going maintenance and repair programme. We found that paintwork was chipped and peeling in the children's toilets which meant that the bare wood could harbour germs. The front door needed attention to ensure that it closed properly at all times. See recommendation 2.

As we have noted previously, some toys and equipment were worn and should be replaced. We made recommendation in our previous report that the provider should continue to review and improve the range and quality of toys and resources. We were not able to see evidence that this recommendation has been met and have therefore repeated it in this report. See recommendation 3.

We made a recommendation that toys and resources should not be stored in children's nappy changing area in our previous inspection report as this increased the risk of infection. We did not review this practice during this inspection> Please refer to recommendation 1.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 3

## Recommendations

1. The provider should ensure risk assessments, for maximising safety and limiting the risk of the spread of infection, are reviewed. This should be carried out with involvement from the staff team and should include the premises, outdoor area and outdoor equipment, and outings. The risk assessments must identify all potential risks and detail how these will be minimised.

National Care Standards Early Education and Childcare, Standard 2, A Safe Environment.

2. The provider should develop a formal system to record faults and repairs required and the action taken in relation to these.

National Care Standards Early Education and Childcare, Standard 2, A Safe Environment.

3. The provider should review and improve the range and quality of toys and resources.

National Care Standards Early Education and Childcare, Standard 2, A Safe Environment.

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 2 - Weak

### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

### Service strengths

We found that the service had an adequate approach to involving children and parents in assessing and influencing the quality of staffing. Please refer to Quality Theme 1, Statement 1.

### Areas for improvement

Please refer to Quality Theme 1, Statement 1.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

### Service strengths

We found that the service had weak practice in ensuring a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

At this inspection, we focused on the following core activities:

- staff records including training records
- observations of staff practice and discussion with staff
- staff rotas

We found the staff team were caring and wanted to provide a good quality service to both children and parents. The provider (who was also the manager) and the staff were all registered with Scottish Social Services Council (SSSC). The SSSC is the body that regulates the social care workforce in Scotland. This meant that the service was complying with this legislation regarding staffing.

Some staff had taken part in training, including an online course on Getting it Right for Every Child (GIRFEC), first aid and food hygiene.

Staff confirmed that they were familiar with the team rotas and that there were always enough staff. The provider confirmed that when needed, the rotas were updated to suit the individual needs and attendance patterns of the children who were cared for.

### Areas for improvement

We made a requirement in our previous inspection report that the provider must ensure that staff access appropriate training so that they have the right skills and knowledge to meet children's needs. The timescale for meeting this requirement was 30 September 2014. The Provider told us that she had started to work with a training company to provide training for staff. The training company had met with the staff team to begin to assess their training needs.

However, there was not yet a planned date for this training to commence and staff had not accessed any appropriate training since our previous inspection. This meant that staff did not always have the right skills or knowledge about current best practice to effectively meet children's needs. This was particularly evident within the room for children aged three to five years. Staff did not know how to meet children's needs appropriately.

They expected children to take part in activities that did not interest them for prolonged periods, and did not allow children to lead their own learning. This resulted in children becoming bored and restless, which staff responded negatively to by telling children that they were not doing as they were told. See requirement 1.

We made a requirement in our previous inspection report that the Provider should ensure that there are appropriate arrangements for ensuring that staff are familiar with and implement national initiatives and current best practice. The timescale for meeting this requirement was 30 September 2014. This had not yet been done. Staff told us that they were keen to access best practice information to help them to effectively meet children's needs, but that they were not clear where to source this. As we have reported, the Provider had moved staff into different rooms. Some staff now working in the room for children aged three to five years had not had any training relating to the Curriculum for Excellence and some staff working with children aged under three years had not been trained in Pre Birth to 3. These are national guidance documents for working with children in these ages groups. We found that children were often not actively engaged in their learning or supported to achieve their next steps in development. Outcomes for children would be improved if staff had a better understanding of providing appropriate care and learning experiences. See requirement 2.

We made a requirement in our previous inspection report that the provider must review and improve the current arrangements for ensuring that staff have an appropriate awareness and understanding of the service's policies and procedures. The timescale for meeting this requirement was 30 September 2014. This had not yet been done. Examples of where staff did not implement the service's policies and procedures were that staff did not ensure that information about children's health needs was recorded and did not always manage behaviour in accordance with the service's written policy. This meant that there were risks to children's safety and health and that positive behaviour was not promoted. See requirement 3.

**Grade awarded for this statement:** 2 - Weak

**Number of requirements:** 3

**Number of recommendations:** 0

## Requirements

1. The Provider must ensure that staff access appropriate training so that they have the right skills and knowledge to meet children's needs.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 October 2014

2. The Provider must ensure that there are appropriate arrangements for ensuring that staff are familiar with and implement national initiatives and current best practice.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 October 2014

3. The Provider must review and improve the current arrangements for ensuring that staff have an appropriate awareness and understanding of the service's policies and procedures.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), regulation 15(b). Timescale: 30 October 2014

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 1 - Unsatisfactory

### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

### Service strengths

The service had an adequate approach to involving children and parents in assessing and influencing the quality of management and leadership. Please refer to Quality Theme 1, Statement 1.

### Areas for improvement

Please refer to Quality Theme 1, Statement 1.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

### Service strengths

We found the service had unsatisfactory assurance systems and processes which involved service users, carers, staff and stakeholders in assessing the quality of service provided. At this inspection, we focused on the following core activities:

- minutes of staff meetings
- quality assurance systems and records
- the attendance register of children and staff
- complaints procedure

The service had maintained its auditing system, whereby a senior staff member sampled records and checklists that staff completed. This helped to ensure that staff were aware of the importance of completing this accurately.

The service had a written complaints policy which staff and parents were aware of. This created opportunities for parents to share their views or raise any concerns they may have about the service.

### Areas for improvement

We made a requirement in our previous inspection report that the Provider must develop a robust system to effectively monitor and evaluate the quality of work of each staff member and the service as a whole. The timescale for meeting this requirement was 30 September 2014. This had not yet been done.

As we have detailed throughout this report, limited progress had been made in relation to some of the requirements that are outstanding from the previous inspection. However, the progress made was not sufficient to meet the requirements. This demonstrated that management and leadership was unsatisfactory and meant that:

- children's individual care and learning needs were not being appropriately met
- there were risks to children's health and well-being
- the environment was not nurturing or stimulating
- staff did not have appropriate skills and knowledge to fulfill their roles and responsibilities

As we have reported, some of the changes made since the previous inspection, for example moving staff into different rooms and ceasing to assess and record children's next steps in learning had resulted in a negative impact on the quality of care. The Provider had not carried out any formal monitoring of practice within the playrooms to enable her to assess this.

Staff had still not had regular opportunities to meet as a staff team. Staff had some involvement in developing an action plan since the previous inspection, however, the Provider did not make sufficient resources available to support this. See requirement 1.

**Grade awarded for this statement:** 1 - Unsatisfactory

**Number of requirements:** 1

**Number of recommendations:** 0

### Requirements

1. The provider must develop a robust system to effectively monitor and evaluate the quality of work of each staff member and the service as a whole. In order to achieve this, the provider should:
  - Give consideration to the resources and personnel required for this task to ensure that it is achievable.
  - Ensure staff have regular opportunities to meet as a team.
  - Ensure staff meetings have a clear improvement agenda and demonstrate how staff are involved in developing, monitoring and evaluating the service.
  - Ensure staff have clear roles and responsibilities for developing the service.

This is in order to comply with SSI 2011/210, Regulation 4(1)(a) a requirement that providers shall make proper provision for the health and welfare of service users

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

We found during this inspection that the quality of food was not always good and the type of food provided to very young children was not always appropriate. The menu for snacks and meals included lots of tinned and frozen processed food. We discussed this with the provider and will consider snack and meal provision as part of our next inspection.

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 1 - Unsatisfactory</b>	
Statement 1	3 - Adequate
Statement 3	1 - Unsatisfactory
<b>Quality of Environment - 3 - Adequate</b>	
Statement 1	3 - Adequate
Statement 2	3 - Adequate
<b>Quality of Staffing - 2 - Weak</b>	
Statement 1	3 - Adequate
Statement 3	2 - Weak
<b>Quality of Management and Leadership - 1 - Unsatisfactory</b>	
Statement 1	3 - Adequate
Statement 4	1 - Unsatisfactory

## 6 Inspection and grading history

Date	Type	Gradings
13 May 2014	Unannounced	Care and support 2 - Weak Environment 3 - Adequate Staffing 2 - Weak Management and Leadership 2 - Weak
26 Jun 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 3 - Adequate Management and Leadership 4 - Good
25 Feb 2013	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and Leadership 3 - Adequate

## Inspection report continued

5 Jul 2012	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 2 - Weak 3 - Adequate 2 - Weak
27 Apr 2011	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
23 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 3 - Adequate 3 - Adequate 3 - Adequate
28 Apr 2010	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 2 - Weak 2 - Weak 2 - Weak

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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