Temple Nursery & Playgroup
Day Care of Children

Traddoch Hall
Temple Village
Gorebridge
EH23 4SQ

Telephone: 01875 830 560

Type of inspection:
Unannounced

Completed on:
23 August 2024

Service provided by:
Temple Nursery & Playgroup, an association

Service provider number:
SP2003003142

Service no:
CS2003013370

About the service

Temple Nursery & Playgroup is registered with the Care Inspectorate to provide a day care of children service, to a maximum of 29 children at any one time to those not yet attending primary school; of those 29 no more than five are aged two years to under three years and no more than 24 are aged three years to not yet attending primary school.

The service is situated in the small village of Temple, Midlothian, close to Gorebridge. They operate from Temple village hall and have use of the large hall, a playroom with a smaller connected room, kitchen area and outdoor space with direct access from the playroom. Children have access to a variety of local spaces such as, the woodland area, local park and farmland nearby.

About the inspection

This was an unannounced inspection that took place on 20 August 2024 between 08:45 and 16:30 and 21 August between 10:30 and 13:30. We provided feedback to the manager and a representative from the local authority on 23 August 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 seven of their family members
- received 15 online questionnaires from parents and families
- spoke with staff and received four online questionnaires from staff
- spoke with visiting professionals
- observed practice and daily life
- reviewed documents.

Key messages

• Staff warmth, kindness and compassion enabled children to feel valued, loved and secure.

• Lunchtime was relaxed and unhurried. Children were actively encouraged to engage in the social experience.

• Strong relationships had been built between the service, children and families.

• The nappy changing facilities should be improved to bring this in line with current good practice guidance.

• Quality assurance and monitoring processes should continue to be developed.

• Children benefitted from a consistent, skilled and knowledgeable staff team.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very 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 received warm and nurturing approaches from staff, which contributed to their overall wellbeing. Staff made sure children felt cared for while in the setting. Parents were positive about the care their children received, one family commented, "Staff have a genuine interest about my child and really show a caring, loving and empathetic relationship with them. They are interested in my child's individual needs and requirements". Consequently, children felt secure and happy in the positive relationships they had formed with staff who made sure children felt loved and enjoyed their time in the setting.

Children experienced a calm and unhurried social lunchtime experience. Staff listened to children and were responsive to their needs as they sat with them at mealtimes and provided assistance when required. Children had opportunities to develop independence skills by serving their own food. Children's individual placemats and flowers on the tables contributed to their sense of belonging. There were ample food choices which were nutritious and reflected current guidance. We highlighted children could have a role in setting up for lunch and their independence could be further enhanced by being involved in tidying up. For example, recycling food and wiping tables. These opportunities would extend children's independence while fostering a sense of responsibility.

Children's overall wellbeing was supported using personal plans. These contained a range of relevant information about children's individual needs. Personal plans were reviewed regularly and updated in collaboration with families. Strategies were in place to support children; these were working well and ongoing evaluation was documented. One family told us, "There is very much an open-door culture and if I had any deeper concerns, I have always been offered a dedicated time to meet to discuss such concerns". We discussed how personal plans could be further enhanced by streamlining information and by taking account of the wellbeing indicators. This would contribute to ensuring up to date information is easy to locate and is effective in promoting consistency and continuity of care for children. We sign posted the service to Care Inspectorate's guide for personal planning.

We reviewed the procedures for storing and administering medication. While medication was stored safely away from children, there were some areas for development. For example, medication was stored in hessian bags and some residue from the bags was visible on equipment such as, the spacer device that attaches to the inhaler and a prescribed medication was not labelled. We discussed this with management and signposted the service to, 'Management of medication in day care of children and childminding services' Care Inspectorate. (See Area for improvement 1 in section 'How good is our leadership?'). Following our visit the service rectified this. Medication is now stored in line with guidance and all medication now has the dispensing label's attached.

We reviewed the procedures for safeguarding children. Overall, staff understood their role and responsibilities around safeguarding and had participated in training, helping to develop their knowledge and skills. We found some inconsistences regarding the service following procedures in effectively managing safeguarding concerns. For example, staffs' communication and next steps regarding reporting on safeguarding concerns. The service was receptive to our feedback and we were assured they would review and update their child protection policy. This would contribute to the overall safeguarding of children. (See Area for improvement 1 in section 'How good is our leadership?')

Staff worked well with children, families and other professionals. Family feedback was positive, one parent commented, "Staff have really taken the time to understand my child and their needs, they really care for them, we have an excellent relationship with all the staff". The service worked with local nurseries and schools to support positive transitions. Joined up working with families and the local authority intervention team, ensured children were provided support that was right for them. Universal approaches promoting inclusive practice supported children's non-verbal communication and overall wellbeing. For example, the use of visuals and skilled staff scaffolding play. Consequently, positive relationships and collaboration contributed to children receiving care and support that was right for them.

Quality Indicator 1.3: Play and learning

Children had fun as they played and explored. They could choose between indoors and outdoors most of the day. Some children were confident in leading their own play. Family feedback was positive, one family commented, "There are a wide range of experiences including, drama, painting, outdoors, water play and free play". Another told us, "Woodwork is a particular favourite as is the outdoor play which allows my child to explore their capabilities and creativity". As a result, children's choice, curiosity, creativity and imagination was developed and extended through the varied experiences they participated in.

Children's play and learning was supported through intentional and responsive planning. However, we found play and learning for children aged two to three years was planned using experiences and outcomes from 'Curriculum for Excellence Scotland' (three to 18). We suggested the service review and consider guidance such as, 'Realising the Ambition' (2020) to inform planning for younger children's play, learning and next steps. We also signposted the service to best practice guidance such as, growing my potential and the voice of the infant. This would ensure experiences provided are suitable to their age and stage of development. **(See Area for improvement 1)**

The service had introduced an online platform to record observations of children's progress and achievements and to share these with families. Family feedback was mainly positive, many commented on the effective use of the online platform. A few families told us they would like to see updates a, "little more frequently". Paper learning folders were also in place which duplicated some of the online information. We discussed with the service consolidating children's learning and progress in one place. This would contribute to ensuring continuous evaluation of children's play, learning and next steps in a timely manner.

Daily routines were in place and supported children's responsibility and independence. However, there were some interruptions to play because of these routines. For example, staff interrupted children's play to encourage them to tidy up before having a story. Whilst there was important learning within these routines, the service could consider if this is developmentally appropriate for younger children.

Connections within the wider community enhanced children's play and learning. For example, some children took part in weekly Forest School which they told us they enjoyed. Children accessed the local park and 'dinosaur farm' as children described it, this was another part of the woods the children regularly accessed. As a result, children experienced first-hand contact with nature, fostering a sense of wonder and curiosity. They were encouraged to explore, use their senses, take risks, and be physically active. The service continued to achieve Eco-Schools Green Flag accreditation. This contributed to children's learning around current sustainable ecological goals.

Children at times were meaningfully involved in their play and learning. Staff extended children's thinking and problem-solving skills through a good use of commenting and questioning. We observed a general love for books and storytelling. Families were invited into the nursery in the morning to help their child choose a book from the lending library. This provided a gentle transition into the nursery and supported children who required extra time to settle. Staff creatively engaged children in storytelling experiences throughout the session. This was further enhanced through weekly drama sessions in the hall. As a result, children developed skills in language, communication, literacy and expressive arts.

Areas for improvement

1. To support children's play and learning, staff should be familiar with current best practice guidance, this would support their knowledge in observing children and planning experiences that support their age and stage of development. This will support staff to develop their understanding that children should be able to direct their own play.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity learning and creativity' (HSCS 2.27).

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

The welcoming environment was clean, with plenty of natural light and ventilation. Staff had made good use of the space available. Children had their own coat pegs and trays for personal belongings, such as, completed artwork. This contributed to their sense of belonging.

Indoor and outdoor environments were mainly developmentally appropriate. Most furniture and resources reflected children's developmental stages. Moving forward, the service could consider extending the variety of natural and open-ended resources indoors. This would provide opportunities for children to become more engaged in their play and learning and develop their curiosity and imagination. Some spaces could be softened to create a calmer and more inviting atmosphere, reducing potential visual overload for children. For example, the smaller room was cluttered and many items were stored on shelfs. Reviewing spaces and resources would further enhance a more homely and calm environment for children to play, rest and learn.

The service was creative in their approach to providing children a range of experiences in their small outdoor play space. Family feedback was positive, one family commented, "My child is absolutely brilliant on a balance bike thanks to the regular access to the outdoors and the bikes". Children enjoyed exploring the playhouse which provided opportunities to play, rest and relax. Families supported the nursery to resource the mud kitchen which created opportunities for children to benefit from a sensory rich play experience. We encouraged the service to continue developing their outdoor space to ensure it provides a range of play and learning opportunities. Some children participated in weekly forest school, this provided opportunities to develop confidence, manage risks and build resilience. As a result, children experienced the wonder of the outdoors and nature, positively impacting on their health and wellbeing.

Staff were confident in their practice in promoting effective infection, prevention and control measures. Hand hygiene routines were embedded and cleaning of areas where meals were prepared and where children ate, were robust. Daily cleaning monitoring sheets were used well and supported procedures around maintaining infection prevention and control. To ensure privacy and dignity and to minimise the spread of infection, improvements should be made to the nappy changing facilities. These spaces should be brought in line with current good practice guidance. To support this improvement, we directed the service to the Care Inspectorate's 'Nappy changing for early learning and childcare settings (excluding childminders)' 2023. This would contribute to children's overall health, wellbeing and safety (see area for improvement 1)

The setting was safe, secure and well maintained. Systems were in place for reporting and maintaining the provision and overall environment. Daily procedures supported staff to identify and remove risks across the environment. This contributed to keeping children safe. The main entrance gate was padlocked throughout the day, this ensured children's safety. Children's information was available to staff and key confidential information was stored in a locked cabinet. Effective systems and procedures were in place to manage electronic information. As a result, children and families' personal information was safe and stored in line with data protection.

Areas for improvement

1. To support children's wellbeing, privacy and dignity and to minimise the spread of infection, improvements should be made to the nappy changing facilities. This should be brought in line with current good practice guidance.

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

'If I require intimate personal care, there is a suitable area for this, including a sink if needed' (HSCS 5.4); and

'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.18).

How good is our leadership? 4 - Good

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

Quality Indicator 3.1: Quality assurance and improvement are led well

Staff worked together to create a caring and inclusive ethos within the service. The vision and values were reflective of the positive relationships developed across the service and within the wider community. One family commented, "The relationships my child has built with the staff has been absolutely fantastic".

Good leadership of the service and relationships between staff and families supported meaningful involvement and development of the service. Families' views were actively sought through a range of methods such as, questionnaires, stay and play and natural family involvement with the parent committee. One family commented, "I know the nursery are always looking for feedback from parents, the staff take feedback seriously". The service supported families' and the local community to come together through fund raising and nursery events such as, a community ceilidh and coffee mornings. One family commented, "Staff are very active within the community, arranging fund raising events that bring the staff, children, parents and carers together". Consequently, genuine partnerships had created a trusting environment were children and families could confidently share their feedback and contribute to the development of the service.

Not all quality assurance systems were working as planned. Although a quality assurance calendar was in place we found some inconsistences in quality assurance processes. For example, the child protection policy had been ticked as updated; however, the content had not been fully reviewed. Similarly, we found inconsistences regarding medication and the documentation and evaluation of children's individual play and learning. Further developing these systems would contribute to ensuring children are cared for in a way that is safe and reflects their individual needs and rights. **(See Area for improvement 1)**

The service had an improvement plan which identified strengths and areas for development within the service. The service had worked well to achieve some of the identified priorities. For example, all staff attended training and implemented new knowledge and skills gained into their practice. This supported inclusive practice, environments and spaces across the service. This contributed to children's individual needs being met, whilst enhancing communication and literacy. To further enhance improvements staff would benefit from being more involved in self-evaluation processes and leadership roles which would develop their skills and responsibility within the service.

Areas for improvement

1. To support quality assurance procedures within the service and to ensure that children are cared for in a way that reflects their individual needs and rights, the manager should, at a minimum:

a) Ensure a robust system is in place to ensure that medication is being effectively stored, monitored, audited and recorded in line with best practice.

b) Monitor, review and audit personal care plans and learning plans to ensure they are reflective of children's current needs.

c) Ensure relevant policies and procedures are reviewed and updated effectively and the service follow these.

This is to ensure the service complies with the Health and Social Care Standards (HSCS) which states:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19); and

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

How good is our staff team? 5 - Very Good

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

Quality Indicator 4.3: Staff deployment

Effective deployment of skilled staff ensured high quality outcomes for children. The small staff team provided warmth, kindness and compassion. This enabled children to feel loved and secure, supporting their overall wellbeing. Families were positive about the staffing ratios, one family commented, "I love that it's a small number of children and a good number of practitioners". Another told us, "The ratios at Temple are amazing".

Continuity of care was considered at busier times of the day. Management was visible and available across the day. Transitions were smooth as enough staff were on hand to support these, which supported an individual and consistent approach for children. Practitioners worked very well together which provided a happy and loving atmosphere across the environment. One family commented, "During challenging drop off where my child has been reluctant to go in there is always someone ready to give cuddles and reassurance to them". As a result, children received high levels of interaction and support to promote their wellbeing and safety.

Good staff retention of the small staff team contributed to minimal staffing changes within the service. As a result, children experienced stability in their care from people who knew them well. Staff communicated effectively as a team, which contributed to keeping children safe and accounted for across the day. They understood each other's knowledge, skills and experiences, and used this information to care for children. Some staff told us they felt communication could be improved regarding when the leadership team were supporting practice in the rooms. This would allow staff to plan more effective ways to extend children's play and learning and ensure a wide variety of opportunities and experiences are available for children.

Management had worked in partnership with the staff to build positive working relationships and supported staff wellbeing. Newer staff were complementary of the induction process, existing staff were supported to develop their knowledge and skills. The manager provided opportunities for staff to develop their practice. For example, some staff had recently enhanced their knowledge to support children in areas such as, drama, forest school and healthy eating. This meant children were being cared for by staff who were trained, skilled and committed to their own professional development. Staff told us they felt supported in their wellbeing and management were encouraging, supportive and accommodating. One family commented, "The staff are incredibly caring and nurturing and always go above and beyond to meet the needs of my child".

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	4 - Good

How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good

How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good

How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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