Arthurlie Family Centre
Day Care of Children

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Type of inspection:
Unannounced

Completed on:
30 October 2024

Service provided by:
East Renfrewshire Council

Service provider number:
SP2003003372

Service no:
CS2003014611

About the service

Arthurlie Family Centre is provided by East Renfrewshire Council. The service is registered to provide a care service to a maximum of 170 children not yet attending primary school of whom no more than 50 are under three years and of whom no more than 15 are under two years.

About the inspection

This was an unannounced inspection which took place between Monday 21 October 2024 and Wednesday 29 October 2024. This inspection was carried out by three early learning and childcare inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the service registered.

In making our evaluations of the service we:

- spoke with and observed children using the service
- contacted families through Microsoft questionnaires to gather their views
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

• The centre worked well with parents and professionals to support children and families providing individual support through nurturing and caring interactions.

• Staff were kind, caring and nurturing in their interactions with the children creating a positive environment that allowed the children to feel safe and secure

• Staff knew children well and could tell us about children's individual needs, supports and strategies.

• Lunch and snack experiences varied throughout the centre.

• Play and learning experiences on offer varied in quality throughout the centre.

• Planning of play and learning should be reviewed to identify children's progression pathway and next steps in their learning.

• We identified a number of hazards and concerns in relation to flooding and drainage issues in the 3-5-year-old garden as well as maintenance required inside.

From this inspection we evaluated this service as:

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

How good is our care, play and learning?	4 - Good
How good is our setting?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning? 4 - Good

Quality Indicator - 1.1 - Nurturing care & support

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

Throughout the nursery children experienced warm, caring, and nurturing interactions from all staff. Children approached staff for cuddles and reassurance and staff were gentle and understanding with children when requiring support. As a result, children were happy, settled and we could see they had built up positive relationships with all staff.

Staff and management were reflective and knowledgeable about child development and the impact of adverse childhood experiences. They worked closely with parents and other professionals to support children who needed additional care and support. Together, they created individual wellbeing plans to guide staff and professionals in meeting each child's health, wellbeing, and safety needs. This approach allowed the centre to provide care tailored to each child, while also offering advice and guidance to families. Parents told us.

'I have a strong relationship with staff who I feel at ease when looking after my child. All staff in the family centre are very approachable and take time to feedback about my child's day at nursery.'

'Staff were amazing at settles and reassuring us at the start while our little one was settling in.'

Care plans were in place for all children present, staff along with parents were gathering key 'all about me' information to support them in the initial weeks of children starting at the service or transitioning between rooms. Staff knew children well and could tell us about children's individual needs, supports and strategies. However, we found the care plans sampled had not been updated, reviewed and did not give clear strategies on how staff would support children's health, wellbeing, or safety needs. Staff and management must look at streamlining, updating, and implementing clear plans for all children, showing exactly how staff are supporting each child's care, play and learning needs. **(Area for improvement 1)**

Lunch and snack experiences varied throughout the centre. In the 2-3 room, children were encouraged to be independent by serving their own food, clearing away dishes, and washing their faces, helping them develop important self-help skills. Staff sat with the children, talking to them and helping them build relationships with their peers. In the baby room, staff made sure each child's needs were met by providing snacks and lunch at times that suited their individual needs. Staff encouraged children to develop early independent skills through encouraging them to feed themselves but supported when required. As a result, children were happy, settled, ate well, and enjoyed sociable, relaxed mealtimes.

We discussed with management the need to review and improve the lunch experience for the 3-5-year-old children. The current environment does not fully meet the children's needs, as the seating arrangements, including the tables, are not suitable for everyone. Creating a more relaxed setting would help children enjoy their meals and interact with their peers. We found that staff were task-focused, with limited opportunities for children to self-serve. Staff were not able to sit with the children to encourage self-help skills, engage in conversations, or model positive mealtime routines. We would ask that management and staff review the current system and setup, referring to best practice guidance such as Food Matters: Nurturing Happy,

Healthy Children and Setting the Table: Nutritional Standards and Practical Guidance for Early Learning and Childcare Providers in Scotland to enhance experiences and encourage greater involvement from the children.

We sampled medication held along with the services policy, procedures and consents forms and found these were in line with best practice guidance 'Management of medication in day care and childminding settings.' We suggested reviewing the permission sheet to make it clear parents have administered the first dose and if a child refuses or spits out medication.

Children were supported to sleep at a time that was suitable to their needs or requested by parents. Individual pods, sleep sheets, and comforters were provided in an environment that supported children to rest and relax. We observed staff to be providing individual support through nurturing and caring interactions. As a result, children rested and slept well, supporting them to be kept in their routine, and ready for play and learning opportunities.

Quality Indicator - 1.3 - Play & Learning

Children were having fun, and most were engaged in a range of experiences that supported their play, learning and development. For example, children were learning to use a pasta machine by experimenting with playdough, developing hand-eye coordination through hammering nails into pumpkins, enhancing math skills while making iced biscuits, and promoting literacy through creative activities using books. Younger children were encouraged to participate in a range of sensory experiences, inside and outside, to support their curiosity and exploratory skills for example 'going on a bear hunt'. As a result, we found that children were developing early-level skills and had opportunities to lead their own play and learning through the experiences created by staff. Parents told us.

'My child's literacy, numeracy and health & wellbeing skills have developed significantly since beginning in the family centre.'

'My child is able to access areas of play which interest them and stimulate her curiosity, wonder and awe'.

However, we found not all experiences sparked curiosity or developed children's imagination, progression or depth in play and learning. Experiences on offer varied in quality throughout the inspection. Children's play and learning was at times interrupted and there were missed opportunities to engage and support children. We discussed this with the management team on the first day of inspection and there were improvements on what was on offer when we returned to the service. The management team should continue to monitor the quality of experiences on offer. This will help to ensure all children receive high quality play and learning every day.

A planning process was in place, and staff used notebooks to record observations and communications from parents. Children's individual 'Seesaw' accounts were being used to capture observations of their experiences, achievements, thoughts, and ideas, and curriculum trackers recorded their progress. Staff were deployed in their curriculum area for up to four weeks to plan experiences aimed at enhancing children's play and learning. While observations of children's engagement, interests, and outcomes helped staff plan tailored experiences, there was limited evidence that this approach consistently supported progression and depth in learning. Staff reviewed their plans before moving to their next area, which helped to ensure continuity and support for colleagues in following children's interests.

However, it was not always clear to identify children's progression pathway or next steps in their learning. We would encourage the service to review their planning cycle to include high quality observations and next

steps, with a focus on children's developmental stages. This will ensure that children are supported to lead their own play and learning that is tailored to their individual abilities and needs. **(See area for improvement 2)**

Areas for improvement

1. The manager and staff should streamline information gathered to ensure personal plans are individualised and sufficiently detailed so it is evident 'how staff are supporting childrens individual care, play and learning needs. This should include but not be limited to identifying next steps in play and learning with focused targets and strategies that are clear and concise for all staff to follow.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices'. (HSCS 1.15).

2.
To support children to achieve their full potential the manager and staff should review the current planning cycle to include high quality observations and next steps, with a focus on children's developmental stages. This will ensure that children are supported to lead their own play and learning that is tailored to their individual abilities and needs. This should include, but not be limited to, high quality observations, meaningful next steps and evidence of progression in learning.

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

'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 to my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27)
and
'My care and support meets my needs and is right for me' (HSCS 1.19).

How good is our setting? 4 - Good

Quality Indicator - 2.2 Children experience high quality facilities.

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

The nursery was warm, welcoming, and well-ventilated. Furniture was child sized, and all playrooms gave children the opportunity to move freely, accessing areas inside and outside independently. Some children had free flow access to outdoors, and this was supported by staff. Moving forward we would encourage free flow access that is tailored to children's individual choice. This will support children's individual needs while promoting healthy habits and lifestyle. Parents told us.
'The centre has a welcoming, nurturing environment.'

'The staff team are friendly and approachable and family's involvement of the centre.'

The indoor playrooms were designed to be inviting, calming, and engaging for children. In most rooms, there was space for children to rest and relax, with soft furnishings and areas where they could play alone or in small groups with their peers. We observed children being happy and freely accessing all areas to play and learn.

We would ask management and staff to continue developing the soft furnishings, with a focus on creating cosy areas where children can enjoy a story, have some quiet time alone, or play with a friend without interruptions

On the first day of inspection, we spoke with management about staff's knowledge and understanding in relation to infection prevention and control measures which included staff's understanding of personal protective equipment and storage of resources. We acknowledge management actioned this immediately. Management should review appropriate use of personal protective equipment (PPE) with all staff to support good infection prevention and control and reduce spreading infection.

During the inspection we identified a number of hazards and concerns in relation to flooding and drainage issues in the 3-5-year-old garden. We found during inspection the surface water was unable to drain away and was limiting children's access as areas were closed off due to the risk of slipping. We identified potential infection control issues as there was stagnant water and areas of mud had built up potentially putting children at risk. We also discussed maintenance inside that requires to be addressed as a priority. **(See area for improvement 1)**

Accidents and incidents were being recorded appropriately, and these were shared with parents. A monitoring procedure was in place, and we have asked management to clearly detail any actions or amendments which will support in safeguarding children and the areas accessed.

Areas for improvement

1.
To protect children's health, wellbeing and safety needs, the provider should ensure children are cared for in a safe and hygienic environment by carrying out appropriate maintenance and repairs.

This should include, but not be limited to:

* Drainage in the 3-5 year old garden.
* Developing the garden areas to ensure they are safe for children to access.
* Carrying out a deep clean throughout the nursery to include skirting boards, windowsills, floors and walls.
* Fix holes in walls in the 3-5 playroom and the trunking within the 3-5 toilet area.

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

'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells,' (HSCS 5.18)
and
'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.24).

How good is our leadership? 4 - Good

Quality Indicator - 3.1 Quality assurance and improvement are led well.

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

Throughout the inspection the management team and staff were open, honest, and reflective on their journey since the last inspection. We discussed staff and management changes that had occurred and the challenges the service had faced. The manager and staff along with outside agencies worked well together to support the children and families attending the service through ensuring they were available throughout the day. This was supporting the service in developing relationships and working together to deliver best outcomes for children and families. Parents told us.

'Arthurlie Family Centre provides the best care for my child. I would like to thank the staff for always considering my child's interests and their daily feedback on how his/her day has went.

'Staff provide a welcoming ethos and always provide a stimulating environment where my child has opportunities to learn, grow and develop his/her skills.'

Management and staff used team meetings, in-service days, and senior leadership meetings as an opportunity to discuss what was working well within the nursery and any areas they wanted to improve. The nursery improvement plan included achievable targets focussed on improving children's learning and experiences.

Staff spoke positively about the improvement journey the centre was on and their role and responsibility in delivering best outcomes for children. For example, during the recent in-service day, the team discussed and reflected on the environment, how they are using the Ferre Laevers scale to measure children's emotional wellbeing and involvement, and recent training undertaken on promoting and nurturing early communication and language training (Panecal). This was empowering and supporting staff on their own professional learning. As a result, children benefitted from a staff team that continued to improve.

The service used some processes for self-evaluation. The manager had developed a yearly calendar of events highlighting meetings and events on a weekly basis over the year. This included, parent workshops, staff wellbeing meetings, welcoming new children, meetings with outside agencies and professionals. This was supporting the management team, and staff to be clear on weekly and daily events and enabling them to plan and organise to support the service to operate smoothly.

Management had also developed a self-evaluation, monitoring overview with focused areas that will be monitored, observed or reviewed on a monthly basis. However, these processes were not yet regular or robust enough to ensure procedures were consistently followed or secure sustained improvement.

Quality assurance, including self-evaluation needs to be more firmly embedded with a focus on, monitoring children's personal plans, children's experiences, monitoring of staff practice and evaluating and improving the nursery. This will support more reflective practice and improved outcomes for children. It would be helpful for the manager to visit the Care Inspectorate HUB where they will find 'The Model for Improvement' which provides a framework for developing, testing, and implementing changes to the way that things are done.
(See area for improvement 1)

The service worked hard at developing relationships with children, parents, and families through parents having opportunities for stay and play sessions; support groups and opportunities for parents to be an active part within the setting for example looking after the nursery fish. Feedback from parents was encouraged through a variety of methods for example questionnaires or discussion boards at the front door.

Parents were welcomed into the centre when dropping off their child, and the centre was in the early stages of encouraging parents in for collection. However, feedback from parents told us they would like to be collecting their child from the playrooms and not the reception areas. We would now encourage the centre to put arrangements in place that enables parents and carers to drop off and collect from their child's playroom. We discussed best practice guidance - Me, my family, and my childcare setting, which will support the centre and parents in developing these transitions and to see the value in these opportunities for children, parents and staff.

Areas for improvement

1. To improve better outcomes for children. Management should develop and implement robust quality assurance systems with a focus on, monitoring children's personal plans, children's experiences, monitoring of staff practice and evaluating and improving the nursery

This is to ensure that management and leadership is consistent with the Health and Social Care Standards that state; 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

How good is our staff team? 4 - Good

Quality Indicator - 4.3 Staff deployment.

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

Staff were enthusiastic about their role and spoke positively about their work. They valued the positive relationships that had developed within their team and felt well supported in their work. Staff worked well together to create a positive and welcoming environment for children and families. The staff teams throughout the centre were kind, caring and nurturing in their interactions with the children. This created a positive environment that allowed the children to feel safe and secure, with adults who cared for them. Parents told us.

'Staff are friendly and welcoming. My child seems happy when in the service.'
'My child has developed many positive relationships with staff and children.'

Staff spoke positively about working in Arthurlie Family centre and told us they felt supported, listened to and able to share their ideas with colleagues and the management team. This promoted a positive ethos within the team that was evident on the days of inspection. Staff spoke positively and passionately about leading initiatives within the service and how they are empowered to do so. For example, bucket time, musicality, schematic play and how they are in the early stages of teaching French.

The nursery was appropriately staffed to meet the needs of the children. There was enough staff in the setting to ensure the safe supervision and engagement of children present.

Staff breaks were planned to minimise the impact on children. However, staff deployment was varied throughout the day, for example: we observed in one room there were many staff involved in gathering children to line up for lunchtime leaving other parts of the room unsupervised, we also observed in another room staff were task orientated and not aware of how they could share responsibilities for better outcomes for children. Staff deployment should be reviewed to ensure the safety and wellbeing of children. This will further ensure that children benefit from positive engagement and are always kept safe.

Management and staff were knowledgeable in relation to child protection and were confident what to do if they had any concerns. They had a clear policy and procedure in place and records kept were in line with best practice guidance. As a result, children were protected and kept safe from harm.

Complaints

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

Detailed evaluations

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

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

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

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

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