Carleton Out of School Club
Day Care of Children

Carleton Primary School
Happer Crescent
Glenrothes
KY7 5DN

Telephone: 07850 950 501

Type of inspection:
Unannounced

Completed on:
29 August 2023

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2003015961

About the service

Carleton Out of School Club is located in Carleton Primary School, Glenrothes. Children from both Carleton Primary School and Coaltown of Balgonie Primary School attend the service. A taxi is used to transport children to Carleton Primary School from Coaltown of Balgonie Primary School and relevant safety checks are in place. A maximum of 24 children up to the age of 14 years can attend at any one time.

Children have access to a designated playroom in the school, as well as a small gym hall and the school playground. The playground includes a wooded area, large grass fields and a paved space for scooters and bikes. They also have access to the school toilets. The service is close to local amenities such as parks, shops and transport links.

About the inspection

This was an unannounced inspection which took place on Tuesday 29 August 2023 between 14:30 and 19:00. The inspection was carried out by two inspectors from the Care Inspectorate.

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

In making our evaluations of the service we:

- spent time with seven children and received feedback from nine of their family members
- spoke with two staff and the manager
- observed practice and daily life
- reviewed documents.

Key messages

- Children were happy and confident, having fun with friends, enjoying high quality play with staff.
- Staff treated children with warmth, kindness and compassion and respected children's rights and choices.
- Children were empowered to lead their own play experiences and staff listened to their interests and ideas to plan play.
- Children and families' views were respected and used to influence how the service improved their work.
- Personal plans were improving and there were plans to develop these further to promote positive outcomes.
- Children's medication should be stored safely in line with current best practice guidance.
- Staff could improve the routine when children arrive in the service to ensure they are safe and accounted for at all times.
- Staff should continue to develop their quality assurance and self-evaluation work to include best practice and reflection on relevant quality frameworks.

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?	5 - Very 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? 5 - Very Good

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

Quality indicator 1.1: Nurturing care and support

Children were nurtured by skilled staff who had built strong and trusting relationships with them. Children were relaxed and confident in their care, chatting to staff about their day and other interests. Staff listened carefully to them, made eye contact and always responded sensitively and appropriately. Children knew that staff would look after them and keep them safe because staff were kind, compassionate and warm towards them. When children were struggling or needed help, they quickly found a member of staff for reassurance and support. This showed the trust and respect that had been built between children and staff. One child, who was attending the service for the first time, smiled and laughed with staff as soon as they arrived. Staff held their hand and spent quality time with them to help them feel safe and secure from the start. All parents identified the relationships their children had with staff as a significant strength. As a result of these approaches, children's needs, rights and choices were fully respected and valued.

Each child had a personal plan that detailed their needs, for example, any allergies, dietary preferences and medical needs. Children had also been asked about their interests, ideas and play choices and this was recorded in the plan. Staff used this information to plan experiences that were fun and exciting for children, based on their own choices. This helped children to feel respected and valued. Parents had also contributed to the plans and they told us they felt included in this process. We asked staff to consider how they could continue to improve the personal plans. For example, the plan could act as a record of children's achievements as well as a working document to note down any significant events in children's lives. This will help them to plan how to fully meet children's needs, rights and choices.

Snack time was sociable, relaxed and fun for children. Staff sat with children and used this quality time to get to know them better, building positive relationships. Children were independent, serving themselves, washing their own dishes and choosing the menu for the week. They were also offered opportunities to bake and try new foods. When children needed help preparing their snack, staff encouraged them to try by themselves first. This gave them the chance to develop life skills in a safe and supportive environment. As a result, children were developing positive relationships with food and nutrition. Staff could now consider how they can use relevant nutritional guidance to develop their menus and contribute positively to children's health and wellbeing.

We reviewed how children's health was supported using medication. Staff and children understood how to offer the right support at the right time for their needs. The records kept about medication were also in line with relevant guidance. We asked the service to ensure that medication was stored safely at all times and this was actioned before we concluded our work. As a result, we were confident children would remain safe and healthy.

Quality indicator 1.3: Play and learning

Children were fully involved in planning, preparing and leading their own play. They were able to choose their own play freely throughout and they did this confidently. All children had fun exploring their own interests and ideas, experimenting with natural materials. Children's interests were valued by staff who worked alongside children to plan play that respected their needs, rights and choices. All parents agreed that they were happy with the play experiences their children enjoyed. One parent said, "The care is fantastic and I cannot speak highly enough about the staff. My child is able to participate in a variety of activities." We discussed with staff how they could further improve children's play experiences by exploring their rights and supporting them to understand how these affect their lives. We encouraged them to find ways to offer a wider and more inclusive range of ways to consult with children, for example, using symbols, signs and pictures. This will ensure that all children are empowered to lead their own play.

Fun and exciting play opportunities helped children to feel happy, confident and excited about going to the club. There was a very good variety of activities for children to choose from and staff supported them very well to encourage high quality play. Children were included in playground games that helped them to build positive relationships with friends and staff carefully considered who needed more emotional support to be included in play. As a result, children's overall wellbeing was being promoted, including teamwork and social skills. Children were outside every day and loved the active and physical play opportunities they had. They were able to lead and set up their own games and this respected their right to be heard and listened to. Staff had identified that they wanted to make better use of the local community and we agreed that this would further promote positive outcomes for children.

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

Children were cared for in a setting that was presented as their own space. Children's artwork and ideas were displayed throughout the room, giving a clear message that their views and achievements were valued. There was a good range of resources for children to play with and children had been asked what was available in the room, including when buying new toys and equipment. There was a good amount of space for children to do different things and explore their own interests without disturbing others. We encouraged the service to continue working with children to develop the range of play resources available, as well as upgrading some of the spaces for play. For example, a better space for rest and relaxation would offer children a more nurturing environment to play in.

Staff worked very well together to keep the premises clean and well-presented. High risk areas such as toilets and food preparation spaces were kept clean at all times. Children were often encouraged to wash their hands to keep themselves safe and healthy. As a result, infection prevention and control measures were minimising the risk of the spread of infection. Staff were reporting any concerns about the maintenance of the setting to the provider. They understood that the chipped paintwork and damaged units impacted on the quality of experience for children. We asked that the service continue to work with the provider to carry out any necessary repairs so children play in high quality facilities that meet their needs.

Children were kept safe most of the time because staff worked well together to remove risks when they saw it. Children spoke confidently about how they kept themselves safe in play; for example, one child showed us how they used cones on a wall to alert their friends to be careful when they played there. Children acted responsibly and helped each other when they needed it. Staff were aware of the risks in play and had updated their risk assessments to reflect this. We discussed with staff how they could improve the routine when children arrive in the service so this is completely safe. We asked them to ensure that children are accounted for at all times to reduce the risk of children leaving the premises and being exposed to avoidable risks.

How good is our leadership? 4 - Good

We found strengths that offered positive outcomes to children with a few improvements that would maximise wellbeing. Therefore, we evaluated this key question as good.

Quality indicator 3.1: Quality assurance and improvement are led well

Staff promoted and maintained a strong focus on building positive relationships with children through high quality play. This focus directly impacted on how staff spent their time and the decisions they made. Children's needs, rights and choices were at the heart of their discussions. Children and families' views were actively sought and respected. We found that children's ideas were being used well to make improvements that were important to them. This was done in a relaxed and natural way that showed children were trusted and valued in making their own decisions. Any changes staff made were focussed on improving children's experiences and respecting the relationships they had with them. Staff told us that the manager was supportive and shared their values as a team. This meant improvements were respectful of children and families' aspirations and built on the trust staff had built with their families. Parents were confident the service was well managed and inclusive. One parent told us, "This is a fantastic, well organised service with amazing staff. My child thoroughly enjoys attending here."

Children benefitted from the staff team's commitment to offer high quality care, play and learning through improvement. The senior and manager had good oversight of the core aspects of care, supporting positive outcomes. Staff also took part in relevant training and development opportunities that helped them to make changes that improved children's play experiences. This also empowered them to identify areas they did well and where they could improve. As a result, their development plan was focussed on children's experiences and outcomes. There was some evidence of how these changes had benefitted children and this was also linked to children's ideas. We asked the team to continue developing their quality assurance and self-evaluation work to include relevant best practice guidance and quality frameworks. This will help them to continue their improvement journey and recognise the impact of their work on children's overall wellbeing.

How good is our staff team? 4 - Good

We made an evaluation of good for this key question. We found a number of important strengths which, taken together, clearly outweighed areas for improvement and promoted positive outcomes for children.

Quality indicator 4.3: Staff deployment

Staff prioritised their routines appropriately, focussing on sharing quality time with children to build strong and trusting relationships. The manager committed their time in the service to nurturing children's needs as well, in the spirit of their vision and values. Staff were often included in children's play, sharing in their fun and excitement. Children enjoyed spending time with them and there was warmth and compassion between staff and children throughout. Each member of staff nurtured all children and understood that spending time with them helped them to feel loved, secure and valued. This helped children build a strong sense of self-esteem and confidence. Children led the play and staff skilfully followed their interests, choices and curiosities. As a result, there was a calm, relaxed and inclusive atmosphere where children thrived.

The team worked well together to meet children's needs. Before children arrived, they discussed what each person would do and how they would achieve a positive experience for everyone. They also spent time talking about individual children and things they might need or want. This planning helped them to work seamlessly when children were there and meet children's needs. Staff enjoyed working with each other and they spoke to each other respectfully. This offered children a positive role model for how to treat each other and care for their friends. Staff roles and responsibilities when children arrive and are being collected could be improved to ensure children remain safe at all times. We asked the team to consider how they can share these roles more effectively to ensure children are accounted for at all times.

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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very 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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