Logan Early Childhood Centre
Day Care of Children

Logangate Terrace
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Telephone: 01290 421 916

Type of inspection:
Unannounced

Completed on:
7 December 2023

Service provided by:
East Ayrshire Council

Service provider number:
SP2003000142

Service no:
CS2003016955

About the service

Logan Early Childhood Centre is a day care for children service provided by East Ayrshire Council in the village of Logan. The service has sole use of the premises and outdoor play area. The service is currently registered to provide a care service to the maximum of 44 children not yet attending primary school at any one time.

Children can freely move between indoors and outdoors. The centre is located in a semi-rural village and is within walking distance of local amenities.

About the inspection

This was an unannounced inspection, which took place on Wednesday, 7 December 2023 between 09:20 and 16:45 hours, and Thursday, 8 December 2023 between 09:20 and 14:00 hours. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection, we reviewed information about the service. This included registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- observed practice and daily life;

- spoke with children using the service;

- reviewed documents;

- spoke with the head teacher and staff; and

- emailed parents/carers to gather their views and feedback.

Key messages

- Children experienced nurturing and warm interactions from staff who knew their preferences and routines.
- Children were settled and engaged in play across the service.
- Children had free-flow access to the outdoors throughout the day.
- The staff team was supported by a committed head teacher and senior leadership team.
- Staff worked well together to create a welcoming environment for children.

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

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

Quality indicator 1.1: Nurturing care and support.

Children experienced nurturing and warm interactions from staff who knew their preferences and routines. Important information had been gathered prior to children attending the service, and children were allocated a key worker who took time to get to know children's likes, dislikes and daily care needs. Families told us the service had, "Very caring staff who get to know your child personally" and "Very friendly and helpful". As a result, trusting relationships had been built.

Staff worked well together as their skill mix and experience complemented each other. Families commented that staff were "Friendly staff, lots of things to play and learn in the ECC", and "The staff team are very caring". This told us that families had confidence in the service.

Staff were kind and caring in their interactions when supporting children with personal care. We observed that children's permission was sought prior to personal care being carried out. This meant children's privacy was respected and their play was not disrupted whilst ensuring their care needs were met.

Children ate their lunch in the school dining hall and good use of appropriate height furniture, including round tables, ensured children's comfort and enabled effective supervision. Children and staff enjoyed sitting together whilst enjoying an unhurried and relaxed atmosphere, ensuring a caring and positive social experience. Children were supported to self-serve foods and drinks; this helped develop independence. However, playroom snack experiences could be further developed by involving children in the preparation to promote independence at all mealtimes.

Staff knew children well. Personal care plans were in place for each child and were updated twice per year with families. Wellbeing logs had been created for each child, which were used by all staff to record achievements and changes in support needs. However, where next steps were identified, strategies that identify how support will be provided needs to be more focused and meaningful for individual children. This will ensure individualised care and support is provided to meet children's needs.

Children were kept safe and well. Medication was stored securely, and children's medication records were accurately completed. Accidents and incidents were recorded and appropriately shared with parents. These processes supported children's overall wellbeing.

Quality indicator 1.3: Play and learning.

Some children were settled and engaged in play across the service. Children spoke about enjoying playing with their friends outside and they were able to follow their play ideas as they explored their environment. The service supported children to have free-flowing play between the indoor and outdoor spaces and, for most children, there were little disruptions to their play as these transitions were planned for and supported. This ensured children were able to lead their play and benefit from extended periods outdoors.

Children benefitted from a variety of natural, open-ended resources outdoors. However, there were less

opportunities for children to develop their curiosity, imagination and problem solving skills during indoor play. We discussed this with staff who shared their ideas for developing indoor play and learning opportunities. We suggested STEM (Science, technology, engineering, and mathematics) concepts, such as problem solving, could be further developed indoors to support this. This would support children to have fun and reach their full potential.

Staff provided children with opportunities to engage with early language and literacy skills through play. The service made some use of environmental print and experiences for children included stories, mark making with various materials, and developing a sense of rhythm through song and dance. As a result, children had fun and were engaged in play.

Some staff understood 'schematic play' which is repeated patterns of behaviours that children display during freely chosen play. Staff offered children opportunities to explore their schemas and develop new skills; for example, rolling balls and transporting objects. This meant children were supported in their development through play and exploration.

The service had some planning in place to promote children's experiences. We found that staff were beginning to build their confidence with the planning cycle but this was at the early stages. Planning for children's experiences should ensure a breadth of learning and include a balance of spontaneous and intentional learning which enables children to have fun. Children should be involved in planning and reviewing what they have enjoyed, linked to their interests and next steps. This would ensure staff fully support children's learning and development across a broad curriculum. We made an area for improvement about this at the last inspection. This area for improvement has not been met and remains in place (see area for improvement 1).

Staff did not always use effective questioning to support children's thinking. This resulted in missed opportunities to support them to explore their ideas and learn new skills.

Areas for improvement

1. To ensure children are supported to reach their full potential, the service should ensure that planning approaches are further developed. Children and staff should be involved in planning for and evaluating learning. Staff should be supported in developing their understanding of the planning cycle with clear links made between planning, learning journals and opportunity to challenge and extend children's learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities.

The service was comfortable, with plenty of natural light and ventilation. Children experienced a setting that

was warm and benefitted from some homely touches as they played. We encouraged the service to look at some of the furniture that needed to be replaced, and to implement some softer lighting. This would help create a calm ethos to support children to self-regulate their emotions.

Children had dedicated play spaces and access to outdoor space, with resources to meet their needs and stage of development. Most parents strongly agreed that their children had access to a good range of quality toys and play materials. Spaces reflected some of children's interests and preferences. For example, a child who wanted to make a paper airplane was supported to make it and take it outside to explore forces and problem-solve when it got stuck in a tree.

Children's safety was promoted as staff understood their roles and responsibilities around infection prevention and control. For example, they supported children to wash their hands at appropriate times, demonstrating good practice. This minimised the risk of cross infection, keeping children and staff safe and healthy.

The manager and staff had a good knowledge of managing risks and how to keep children safe. Risk assessments had been developed for all areas, including within the setting and wider community. These were regularly reviewed and updated, which helped keep children safe.

Staff made use of the wider community with local walks, and they were involved in the development of a plan for a new park within the local area. This meant children were developing a sense of self within the wider community.

How good is our leadership? 4 - Good

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

Quality indicator 3.1: Quality assurance and improvements are led well.

The service displayed their vision and values for children and families which had been recently reviewed. However, there had some changes within the staff team and staff were not fully aware of their vision and values. We suggested they revisit and reflect on them as a team, to promote a sustained and shared vision across the setting. This will support staff in knowing what is important in the setting and ensure they continue to work together to meet children's needs.

Children and families experienced a welcoming and homely ethos as positive relationships had been established between families' and children's keyworkers. One parent said, "Staff took time to talk with families to support a smooth transition at drop off and pick up times." The service had planned 'stay and play' sessions, which parents were keen to take part in. Learning journals recorded that some parents had asked for more information to be shared with them about their children's learning.

Families' views were gathered using questionnaires. The service had recently consulted them on the introduction of learning journals as they were keen to gather families' experiences with the new system. We suggested ways to gather views more regularly and involve children in the process. This would support the service in their ongoing development to ensure positive outcomes for children.

The service had an improvement plan with a focus on children's health and wellbeing, family involvement,

and developing some self-evaluation processes to inform continued improvements. This had led to improvements in the outdoor environments and increased infection prevention and control practices. We suggested the service share their improvement plan with families, involving them in the journey and evidencing the progress.

Some staff had begun to engage in the cycle of self-evaluation using Education Scotland's practice document, 'How good is our early learning and childcare'. However, staff skills at evaluating what they did well and what they wanted to develop further was at early stages. The team worked closely with the local authority to develop practice and experiences for children. We encouraged them to continue this positive partnership working to build on their improvements and engage in reflective discussions. This would ensure they continue to offer children high quality play and learning.

The service had developed a clear quality assurance system. This involved monitoring of children's information, communication and involvement with families, and room observations of practice and provision. This had begun to ensure a more consistent approach and clearer expectations for staff in supporting outcomes for children. We recognised the commitment from the head teacher, senior leadership team and staff in sustaining this system to promote high standards in the service. Some staff commented, "We work well as a team; we have continual professional dialogue. We have good working relationships with children and their parents." All staff told us they enjoyed working in the service. Staff told us they worked together to help and support each other. This created a culture of respect, care, and support amongst the team.

How good is our staff team? 4 - Good

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

Quality indicator 4.3: Staff deployment

Staff worked well together to create a welcoming environment for children. They felt supported by the senior leadership team and valued the positive working relationships that had been built within their team. They communicated in a respectful way and spoke with enthusiasm and passion about their roles, which demonstrated positivity and commitment to their role.

Staff valued their colleagues and offered support which had created a culture of respect. This meant staff's wellbeing was supported and created a warm, welcoming ethos for children.

Staff were clear about the routines of the day and deployed themselves to ensure children experienced ongoing play and learning opportunities. As a result, children's play was not interrupted.

Staff engaged in professional learning sessions to support their development priorities. This included training on meeting children's needs through a quality curriculum, first aid and child protection. Some staff were able to reflect on training and talk about the impact on their practice. This showed a commitment to their professional development to enhance positive outcomes for children.

A robust process for undertaking staff appraisals was not in place. As the result, staff did not have opportunities to review their progress, celebrate their success, or identify areas of practice for further improvement with the senior management team. As a result, there were missed opportunities for staff to

improve their skills.

Staff were engaged with champion roles within the service but these were at the early stages. Champion roles provide staff with leadership responsibilities to develop an aspect of service delivery. Staff should continue to develop these roles, and they should be monitored to assess the impact of these for staff, children and families.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The head teacher should make improvements to the medication processes within the service to ensure they comply with Care Inspectorate's guidance; "Management of Medication in Day care of Children and Childminding Services". The head teacher should ensure:

(a) Medication permissions are stored within close proximity to the medication, to ensure staff can quickly locate the medication, appropriate consent and dosage instructions.

(b) Individual risk assessments and health plans are developed for children requiring emergency medication. This includes but is not limited to, children who require treatment for asthma or allergy medication.

(c) Effective quality assurance processes are in place and monitored by management to ensure the safe management of medication.

(d) Effective risk assessments and health plans are in place to support children's experiences and needs at mealtimes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention I experience is safe and effective' (HSCS 1.2).

This area for improvement was made on 13 May 2022.

Action taken since then
Medication processes were in place in line with current guidance

This area for improvement has been met.

Previous area for improvement 2

The head teacher and staff should ensure that children's personal care plan information is reviewed and updated where appropriate to ensure children's health, wellbeing, and safety needs are met.

The personal plan should include, but is not limited to:

- Being reviewed at least once every six months or more when required.
- Management review all information held in children's personal care plans.
- Staff demonstrate appropriate best practices when completing entries and changes to children's personal care plans.

This is to ensure that 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).

This area for improvement was made on 13 May 2022.

Action taken since then
Improvements have been made to children's personal plans.

This area for improvement has been met.

Previous area for improvement 3

The head teacher should take action to reduce the risk of infection spreading and ensure children experience a safe environment. In order to achieve this, action taken should include but is not limited to:

a) Ensure all areas of the service are free from unnecessary clutter to ensure cleaning arrangements can be effective.

b) Ensure all hand towels are placed in dispensers and hand soaps are stocked daily.

c) Review handwashing procedures to ensure staff and children are implementing handwashing at all appropriate times throughout the day.

d) Carry out an audit of infection prevention and control practices throughout the service.

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

'My environment is safe and secure' (HSCS 5.17).

This area for improvement was made on 13 May 2022.

Action taken since then
Staff and children had good infection prevention control practices in place and the playroom was free from clutter.

This area for improvement has been met.

Previous area for improvement 4

The head teacher and staff should review children's learning and development planning files regularly, to ensure children's interests are considered, and appropriate challenge is provided for children within their play and learning environment.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am supported to achieve my potential in education and employment if this is right for me'

(HSCS 1.27); and
'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 13 May 2022.

Action taken since then

Planning processes were in place; however, they were at the early stages. There was missed opportunity to challenge and extend children's learning.

This area for improvement has not been met.

Complaints

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

Detailed evaluations

How good is our care, play and learning?	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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