Headstart Nursery, a partnership
Day Care of Children

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Telephone: 0141 248 5779

Type of inspection:
Unannounced

Completed on:
30 July 2024

Service provided by:
Headstart Nursery, a partnership.

Service provider number:
SP2003003665

Service no:
CS2003019876

About the service

The service is registered to provide a care service to a maximum of 77 children at any one time, aged from birth to those not yet attending primary school. At the time of the inspection 46 children were using the service.

The nursery operates from the ground floor of the Skypark building in the centre of Glasgow. It is situated close to a selection of shops, amenities, and links to public transport. The facilities consist of four main playrooms, an indoor physical space, and two small outdoor spaces. The service makes use of their local community to support and extend outdoor play beyond the setting.

About the inspection

This was an unannounced inspection which took place on 29 and 30 July 2024. 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:

- spoke with children using the service
- spoke with staff and management
- reviewed 15 completed questionnaires
- observed practice and daily life
- reviewed documents.

Key messages

- Staff were nurturing, friendly, and had meaningful relationships with children and their families.
- Children were confident and were having fun.
- The service continued to make good use of the local community to extend outdoor play beyond the setting.
- The management team had further developed the self-evaluation process, using self-evaluation frameworks.
- The management team had begun to take a more formal approach to gathering people's views and using these to influence change.
- The approach to personal planning for children was inconsistent.
- Staff should continue to develop their environments to be curious, homely and give space to meet children's needs.

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 clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support.

Staff had a nurturing and inclusive approach. They were compassionate, friendly and had built meaningful relationships with children and their families. This enabled them to foster positive attachments with the children which supported them to feel loved, valued, safe, and respected. Parents told us the staff cared and supported their children well. Comments we received included:

"Lovely warm and caring environment and staff that are deeply engaged and motivated to give a fantastic service."

"Very much a family friendly feel. They know all the children, not just those in their rooms. My children enjoy going to nursery and clearly have good relationships with all the staff!".

Staff had reflected and made positive changes to mealtime experiences for children. Children enjoyed a calm, unhurried sociable snack and mealtime with their peers and staff. Children were fully involved in the preparation of lunch time, where they set the tables attractively with table covers and crockery. Children were offered opportunities to develop their independence and social skills by self-selecting their own drinks and foods. Meals were nutritious, and dietary and allergy requirements were catered for carefully, respectfully, and safely. We concluded staff had developed and facilitated quality mealtimes that were nurturing for children and supported their overall health and wellbeing.

Staff knew children well and responded to their needs sensitively and quickly. The service had an outstanding area for improvement to develop personal planning processes for children. We noted that although staff knew children well there was inconsistencies within the information recorded within personal plans. We concluded more auditing and support for staff is needed to ensure the personal planning approach is robust and supports staff to care for children in line with their individual needs. See area for improvement 1.

Sleep time was managed well. Staff had recently taken part in safe sleep training. Safe sleep checks were in place, along with a safe sleep policy. Children were able to rest or sleep safely in line with their sleep routines recorded within their personal plans.

Overall, medication was stored and administered safely. We sampled medication records and found almost all medication records were completed accurately. We discussed with the management the importance of robust monitoring of medication to ensure all records are completed accurately and medication administered safely. This is to ensure that when children require medication it is done safely in line with the prescribed instructions.

Staff were knowledgeable about procedures and processes for reporting any safeguarding concerns about children. Child protection lead officers had been appointed. All staff had taken part in child protection training to refresh their knowledge and confidence. We were satisfied that staff were aware and confident in their roles and responsibilities to keep children safe and protected.

Quality indicator 1.3: Play and Learning.

Children were involved in leading their play and learning through a balance of spontaneous and planned experiences. We observed staff facilitating experiences that supported children's numeracy, literacy, and language development. For example, staff sang to children as they played, incorporating numeracy and literacy within the songs. We concluded children were having fun as they experienced good play and learning development opportunities.

Staff were supporting children's right to play. Changes had been made to the day and routine to support children to have more choice. We observed children being consulted about going on outings both days. Outings were planned in response to children's interests, they supported children's play beyond the setting and community links. Children were able to choose to go out to the outing or stay and continue with their chosen play projects in the nursery. This meant children felt listened too, as they came to a natural pause in their play and made decisions about where they might play next.

Staff shared their observations of children at play with families via an online platform. They shared regular inputs containing photographs of children's play, along with some basic observations. We found staff skills in recording observations was mixed, some observations lacked depth and analysis of learning. The management should continue with their plan to further support staff with time to reflect and develop their observation skills. This will support staff to gather evidence of children's progress, plan next steps and share achievements. Parents provided positive feedback about children's learning opportunities and the use of the online platform.

Parents commented:
"We can see from updates in the learning journal our child has been doing lots of learning through play focusing on letters and numbers."

"We get photo and video feedback, which always highlights how much fun they are having".

This supported partnership working, where families could work with the service to develop children's play and learning.

The commitment of the managers to ensure staff had protected time supported staff to reflect and explore best practice guidance. Staff had taken part in training, and had begun to meet in small groups to reflect and make improvements to their practice. This had a positive impact on the outcomes for children. For example, staff reflections and planning led to playroom environments offering more curiosity and enquiry for children. As a result, we observed most children to be engaged and having fun. Staff supported children to access a range of interesting resources that supported their skills. This demonstrated that staff were developing their approach to supporting children to reach their full potential.

Areas for improvement

1. Personal plans should be improved to ensure that they record the right information to meet the health, safety, wishes, choices and wellbeing needs of the children.

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); and 'My needs as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

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 nursery was well furnished, had areas for children to rest and relax and was decorated in natural tones that created a homely feel. The rooms were bright and benefitted from natural ventilation through open windows. Staff were working through plans to improve their environments. Some areas benefited from soft materials and enclosed areas. This supported children to rest and relax in a quieter space that did not over stimulate. This sent a message to children that they matter.

Most playrooms were laid out carefully to support children with enough space to meet their needs. We noted the playroom for older children had been reviewed, and staff had defined areas and added more stimulating resources to meet children's needs. We spoke to staff about reviewing the amount of furniture in this room to ensure children had adequate space for their needs. The management and staff agreed to review this as they continued to develop their environments.

Infection, prevention, and control policies and procedures were in place. For example, we observed staff and children practice effective hand washing and the building was visibly clean. This protected children and staff from the spread of infection.

There were well functioning arrangements in place for monitoring, maintenance, and repair of the setting. We noted the manager had developed a trusting and positive relationship with the Skypark facilities team who was on hand to report any maintenance issues and arrange swift repair. This meant children benefited from a safe and well-maintained environment.

Indoor and outdoor environments were developmentally appropriate. Children had access to a small secure garden for outdoor play. During our inspection the main outdoor space was not used well. We encouraged the service to review the main outdoor space to offer more curiosity and enquiry. Staff were committed to ensuring children received opportunity for outdoor play daily. They used their community well to support children's play beyond the setting. Children also benefited from a second outdoor "growing garden" where they learned about growing and harvesting vegetables and fruits. We concluded children had access to developmentally appropriate outdoor play spaces that supported their play, wellbeing and overall development.

Staff demonstrated an understanding of their role in keeping children safe. A register was in place, along with secure door entry to the building. Staff were observed checking and updating the register as children arrived and left the setting with their adult. We concluded this helped keep children safe and supported staff to account for children while they attended the service.

How good is our leadership? 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 3.1: Quality assurance and improvements are led well.

The vision, values and aims were detailed within the service improvement plan, and on the nursery website. Leaders and staff were welcoming and nurturing in their approach. The parents' feedback demonstrated parents felt involved and the service had a welcoming and supportive ethos.

The management team had recently gathered the views of families and children to measure change and inform future enhancements to practice. Almost all parents who provided feedback agreed or strongly agreed with the statement: 'My child and I are involved in a meaningful way to help develop the service '. We reviewed evidence that the management and staff team had agreed actions to meet family and children's wishes. The gathered feedback and agreed actions were shared with families. For example, some parents had suggested they were not fully aware of the child protection procedures and responsibilities staff worked to. Management had then detailed these within the nursery newsletter and displayed in the hallway. This led to parents being more informed, and feeling their views were valued.

We acknowledged that the managers had created a welcoming and supportive ethos for staff, they welcomed their comments and suggestions through an open-door policy and approach. The management team had begun to formally gather staff views through staff appraisals and self-evaluation activity. Staff views from appraisals were used to inform the training plan for individual staff. Staff told us they found the process supportive. This meant that children benefited from a staff team who were reflective and developing their skills through continued professional development.

The management and staff team were working toward the end of their current improvement plan. Staff were aware of the improvement priorities and could talk about the tasks linked to the plan. The management team and staff carried out quality assurance and self-evaluation in line with their quality assurance calendar. Almost all the quality assurance and self-evaluation had brought about positive changes and improvements to practice that supported better outcomes for children. For example, staff and management had been monitoring and reflecting on their lunch time experience. They used best practice guidance to help benchmark good practice. They had made changes to their practice that resulted in children experiencing a sociable and calm lunch time that supported their development.

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 clearly outweighed areas for improvement.

Quality indicator 4.3: Staff deployment.

Staff demonstrated a commitment to their role and were enthusiastic about providing quality care and learning for children in their setting. We received positive feedback from parents about the staff team. Some of their comments included:

"Friendly attentive staff. It's quite clear they care about their jobs and the children they look after."

"They are very friendly, informative and dedicated".

There was a consistent staff team. There was a mix of staff's skills and knowledge across the playrooms. Some staff had been employed with the service for an extensive period, while others had recently joined. Senior staff were in place, they effectively supported and mentored staff as well as carrying out additional duties placed upon them. This created a flexible and supportive ethos where staff supported each other, working together as a team to benefit the children.

Staff breaks were planned in a way that minimised impact on children while allowing staff time to relax and refresh. The provider had employed additional staff above the minimum staffing ratios. This meant staff were able to care and support all children well across the whole day. This ensured that children received care from familiar staff, supporting the continuity of care for children.

We found staff worked well as a team. We observed staff communicating well with each other across the day as children moved around the service or required support for their care and learning. This created a flexible and supportive ethos where staff supported each other, working together as a team to benefit the children.

Staff caring for children were recruited safely and registered with the Scottish Social Services Council. They are the regulatory body responsible for registering the social services workforce. They provide public protection by promoting high standards of conduct and practice and support the professional development of those registered with them. We sampled staff recruitment files and found staff were recruited safely. This helped keep children safe.

New staff spoke positively about their induction process. They had a mentor to support them. They were given time to learn about the nursery procedures and develop relationships before they were given key worker responsibilities. We discussed with staff and management how the use of Scottish Governments 'Early learning and childcare: national induction resource' would further enhance their induction process. Staff appeared eager to explore this guidance to enhance their induction. We concluded staff were inducted well. The process supported staff to have the confidence and information to provide nurturing care for children safely, and in line with their needs.

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

Personal plans should be improved to ensure that they record the right information to meet the health, safety, wishes, choices and wellbeing needs of the children.

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); and 'My needs as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

This area for improvement was made on 25 October 2023.

Action taken since then

We found the approach to personal planning was inconsistent. For most children they were completed well. For these children the right information to meet the health, safety, wishes, choices and wellbeing needs of the children was recorded. However, in contrast for some children plans were not accurate and did not reflect the information that staff knew about children.

This area for improvement requires more work and has not been met. It has been repeated in section: 1 How good is our care, play and learning of this report.

Previous area for improvement 2

Staff should have time to reflect on best practice guidance. The manager should create opportunity for staff training, and time for staff to reflect on their practice. This will contribute to building a team with good understanding of current best practice, theory, evidence-based approaches, and knowledge of child development.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:
'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 25 October 2023.

Action taken since then

Managers had created opportunities for staff protected time for training, and to reflect on their practice. Staff had explored best practice guidance and planned improvements to their practice. This had led to staff having more confidence and skills in current best practice guidance, theory and evidence based approaches. As a result, improvement had begun to take place to the environment and approaches. This had a positive impact on children's experiences and engagement.

This area for improvement has been met.

Previous area for improvement 3

To support high quality outcomes for children and families, the managers should develop a more formalised and targeted approach to self-evaluation and improvement planning of the service. This should include formally gathering people's views to use as a starting point for improvement.

The managers and staff team should refer to best practice guidance documents such as 'A quality framework for daycare of children, childminding and school-aged childcare' found within the HUB area of the Care Inspectorate website.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that:
'I experience high quality care and support based on relevant evidence, guidance and best practice'(HSCS 4.11) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 25 October 2023.

Action taken since then

The management and staff have made significant progress to how they quality assure, self-evaluate and plan improvements to their service. Self-evacuation, quality assurance and improvement planning had led to continuous improvement of the service. As result, outcomes for children had improved. See section: 3 How good is our leadership of the report for more information.

This area for improvement has 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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