Mulberry Bush Montessori
Day Care of Children

20 Teviot Street
Yorkhill
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Type of inspection:
Unannounced

Completed on:
12 July 2023

Service provided by:
Mulberry Bush Montessori Limited

Service provider number:
SP2003001127

Service no:
CS2003039173

About the service

Mulberry Bush Montessori provides early learning and childcare to a maximum of: 12 children aged under one year; 20 children aged one to two years; 20 children aged two to under three years; 45 children aged three years to not attending primary school. The service is provided from a detached building in the Yorkhill area of Glasgow. The service is close to main roads, bus and train routes, local shops and parks. Playrooms are situated around an open play space in the centre of the building. There is also a secure outdoor play area.

About the inspection

This was an unannounced inspection which took place on Wednesday 5 July 2023 between 09:15 and 16:30. 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 throughout the inspection year. In making our evaluations of the service we:

- spoke with several children using the service and reviewed survey responses from 17 parents whose children attend the service
- spoke with the management team and eight staff
- observed practice and staff interactions with children
- reviewed documents.

Key messages

• Children benefited from a skilled staff team who worked very well together and had created a welcoming, inclusive environment.
• Positive working relationships between the manager team and staff promoted a collegiate approach to providing high quality play experiences for children.
• Children experienced interesting and motivating play and learning opportunities.
• Children were spoken and listened to in ways that encouraged them to feel valued and included.
• Staff were motivated, well led and passionate about improving outcomes for all children.
• Medication processes within the service to be reviewed and updated in line with best practice guidance.
• Widening opportunities for outdoor play beyond the setting to be focus of future improvement and professional development planning.
• Practical consultation strategies for strengthening parental engagement in the improvement planning process to be implemented.

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 made an evaluation of good for this key question as we found performance where there was a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on children's experiences and outcomes.

Quality indicator 1.1 Nurturing care and support

We looked at how the service's planning approaches for children's care, learning and development ensured they experienced positive outcomes. Children benefited from a skilled staff team who worked very well together and had created a welcoming, inclusive environment. Their knowledge of child development and the Montessori approach resulted in children's individual needs being met. We observed staff being responsive to children's changeable interests and demands. Children were spoken and listened to in ways that encouraged them to feel valued and included.

Staff worked closely with families, involving them in decisions about their child's care and development. Children's personal plans reflected these discussions, and recorded strategies that were being used in practice to help children achieve and progress. The information systems in place for documenting children's care needs were regularly reviewed and enabled the staff team to respond sensitively and compassionately to changes in a child's life. Staff told us how they worked with parents to ensure personal plans included the information needed to provide appropriate care, meet any medical needs and take forward children's learning and play interests. One parent commented: "I have only praise for Mulberry Bush and their staff. They keep parents well informed and tailor care for each child in their care." Another parent told us: "We don't often have time in the nursery setting. I believe that the staff are nurturing and caring and my daughter feels safe and secure when there. Perhaps the communication could be provided somewhere other than verbally. I'd also love to see photos of my daughter enjoying her time with her friends if possible." We highlighted documentation approaches that would support staff to focus more on providing a clear summary of children's key care support and learning needs within relevant support plans.

We sampled children's medication stored within the premises. We found the medication permission and recording systems in place and found that the medication processes within the service should be further reviewed and updated in line with best practice guidance. We highlighted key points from our guidance "Management of medication in daycare of children and childminding services" (2014) including the following: that childcare service providers should not keep stocks of medicines for communal use just in case a child displays symptoms of a minor ailment or allergy; that the service must make sure that parents and carers provide written time-limited consent for their child to be given medicine for any minor ailment or allergy; parents should not be asked to give general permission for childcare services to administer medication at any other time. During the course of the inspection the manager adapted the medication administration and storage procedures to comply with this guidance.

We identified a number of adaptations to staffing arrangements and practices during lunchtime routines which would increase opportunities for staff to be responsive to individual needs and support children to develop positive attachments with key adults. We signposted the manager to our practice note "Keeping children safe: supporting positive mealtime experiences in early learning and childcare (ELC)" to support professional reflection on mealtime improvements within the staff team.

Quality indicator 1.3: Play and learning

We found that staff promoted a culture within the service that focussed on promoting the children's right to play and experience challenge. Staff held high aspirations for children's learning that supported children to be successful. As a result, children were confident, happy and motivated to learn. All of the parents we surveyed agreed or strongly agreed that they were fully involved and informed about their child's learning and development and their child had opportunities to be involved in meaningful, interesting and fun play experiences.

Staff worked hard to provide a variety of high quality learning experiences by continuously promoting choice, children's interests, as well as tracking and reflecting on individual achievements. Staff took time to extend conversations with children about their play and we observed some well-timed open ended questioning that further extended and challenged thinking and learning. We noted that specifically designed Montessori play resources were available to children. These encouraged children to experiment, problem solve, be creative and develop mathematical and fine motor skills. We observed children play with these resources independently at their own pace in a manner that encouraged perseverance and concentration at appropriate levels of developmental challenge. There was an emphasis on encouraging children's independent capacity for managing self-chosen tasks. For example, filling glasses with buttons using tongs; hanging up dolls clothes on a mini wooden drying frame; experimenting with water displacement using jugs and funnels. This approach supported children to learn and develop at their own pace while building confidence, independence and self-esteem.

We discussed with staff strategies for developing children's sense of ownership of leading change related to their self chosen collaborative play projects. Staff agreed that more flexible use of planning tools based on observations of children's most engaging and involving play experiences could strengthen existing opportunities for children to shape their play environments. This can extend opportunities for staff to reflect on when groups of children display deep level engagement in their play and support them to provide greater autonomy and choice as to how this will be taken forward.

Through discussion, it was evident that staff had a shared understanding of child development and early years pedagogy and used this to scaffold and shape the breadth and depth of children's learning. We found that staff used observations of children's significant play interests to adapt their support for and resourcing of play experiences. We highlighted the value of staff continuing to develop their skills in identifying the significant learning of each child as they observe them at play. This will ensure that they are able to identify what each child needs to learn next. We identified a need to ensure these next steps were specific, so the progress children were making was measurable.

How good is our setting? 4 - Good

We made an evaluation of good for this key question as we found performance where there was a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on children's experiences and outcomes.

Quality indicator 2..2: Children experience high quality facilities

Children were cared for in a welcoming, comfortable environment which was bright and well ventilated. Rooms were well furnished with ample space for children to participate in a variety of activities. Younger children had access to a courtyard area which they used regularly.

Older children benefitted from having access to a secure, well equipped outdoor space which provided the opportunity to participate in a variety of experiences.

Indoor spaces were comfortable and structured to suit children's developmental and learning needs. Playrooms and toilets were clean and any maintenance issues were dealt with appropriately. We highlighted to staff the need to ensure paper towels in all toilet areas were kept in covered containers to reduce the risk of potential cross-contamination. Younger children benefitted from a separate area for lunch and snack which was welcoming and calm. Changing areas were clean and routines were in place to ensure necessary precautions were taken to prevent the spread of infection. The nappy changing area for babies, however, did not offer privacy during their personal care. We spoke to management about utilising a screen to ensure that children's personal care needs could be met while maintaining their privacy and dignity.

The outdoor areas were safe and secure. For older children there was a sheltered area which could be used to cover from the weather, and also offered a quiet space for children to rest. Staff informed us that they are sourcing new resources for the courtyard used by younger children, to meet their needs and interests. Younger children benefit from daily walks in the local area and make use of libraries, museums and parks.

Staff shared with us that they previously planned regular forest kindergarten experiences with the children, which they enjoyed. We discussed with the manager how it would benefit children to reintroduce a similar programme of outdoor activities. The manager agreed that this would widen opportunities for children to manage risks in their environment, experience nature and engage in more challenge through outdoor play. The manager agreed to make this a focus of future improvement and professional development planning.

Staff were vigilant and took account of where children were at all times. Portable two-way radios were used by staff to communicate between indoors and outdoors, and children's movement between areas was noted. Registers were also used in each room which were taken with staff when going on outings. This helped to ensure that children's ability to play safely was not compromised.

How good is our leadership? 4 - Good

We made an evaluation of good for this key question as we found performance where there was a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on children's experiences and outcomes.

Quality indicator 3.1: Quality assurance and improvement are led well

We found that staff were motivated, well led and passionate about improving outcomes for all children. Staff told us how the manager provided a clear focus for their shared team work including setting out clear responsibilities and expectations. We found that the team worked together effectively to evaluate and reflect on their practice. We found that team meetings took placed regularly and staff had the opportunity to take part in one to one meetings with management. These provided an opportunity to discuss any improvement ideas and identify any related training needs. Staff were keen to take forward current ideas, develop and implement best practice guidance. This resulted in children experiencing quality interactions and a broad range of stimulating play experiences centred around their emerging interests.

The manager had a good understanding of the strengths of the service and what was needed for improvement. The service had an improvement plan in place which was shared with families. A termly parental survey was used to enable parents to contribute suggestions and thoughts. The manager told us how they dedicated time to analysing children's, staff and parents' contributions to any consultations and extracting the key messages or themes. This feedback had been used to support the development of the improvement plan which clearly set out the service priorities and targets for change.

Some parents told us they would like more daily engagement within the service. One parent commented that they would like: "Some more contact time in the rooms. We have had stay and play, and social family events. These have been invaluable especially as we missed out on so much collective contact during Covid." Another parent told us: "Even after covid restrictions have ended parents still do not come into the nursery for pick up. We have to wait at the door. It would be nice to have a portal or a channel that we can see what our kids have been doing throughout their day". The manager told us how they planned to use the feedback from the inspection to widen parental engagement and support children's and parents' contributions to the service improvement plan. They discussed current plans to review and develop the nursery's vision, values and aims through shared discussion with parents and staff. More than half of the parents we surveyed and most staff told us that they were involved in a meaningful way to help develop the setting. They told us that their ideas and suggestions were used to influence change.

We highlighted practical consultation strategies for strengthening parental engagement in the improvement planning process. The staff agreed these would help strengthen the capacity of service to deliver high quality care and support tailored towards children's and families' particular needs and choices.

How good is our staff team? 5 - Very Good

We made an evaluation of very good for this key question as we found performance that demonstrated major strengths in supporting positive outcomes for children and did not require significant adjustment.

Quality indicator 4.3: Staff deployment

Effective staff deployment across the service meant that children's individual needs were being met by the right number of staff throughout all elements of the day. The staff to child ratio allowed staff to be responsive to individual needs which enhanced children's experiences and ensured children had the right support at the right time. Children who required additional support were well supported by staff to feel respected and included in daily experiences. This was enhanced through effective working relationships with families. One parent commented: "Great staff who seem to genuinely care for all the children. Their enthusiasm is clear and my child responds very well to them." Another parent told us: "I have nothing but praise for all the staff. They clearly care about my son and he adores them." A third parent commented: "There are some staff that go above and beyond, they have been fantastic."

A robust induction process supported newly appointed staff to meet children's needs. The induction programme helped new staff to settle into their role and become part of the staff team. As a result, they were clear about their roles and responsibilities which supported children's experiences. We highlighted to the manager the value of extending the period of induction. This can help to ensure new employees understanding of the full range of policies and procedures is more fully embedded. We identified a need for the induction of temporary staff to be monitored to ensure that this involved refresher training in child protection and safeguarding.

Overall, the staff routinely engaged in a range of professional learning activities that built on and sustained their practice. For example, staff had recently undertaken training on: paediatric first aid; leadership of change and the early childhood curriculum; language and literacy, Glasgow counts trackers; higher order thinking skills. We found staff were confident in discussing how they had improved their practice as a result of their own professional learning activities. Staff told us how their professional learning was linked to a variety of leadership roles within the team. We found that this learning had a positive impact on the quality of experiences for children, their progress and wider improvements in the setting.

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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