Caskieberran Out of School Club
Day Care of Children

Caskieberran Primary School
Ravenswood Drive
Glenrothes
KY6 2NZ

Telephone: 01592 758 308

Type of inspection:
Unannounced

Completed on:
11 December 2024

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2004072375

About the service

Caskieberran Out of School Club is registered to care for 27 school aged children during term time and 40 school aged children during holidays and in-service days. It is located in Caskieberran Primary School in a quiet residential area of Glenrothes. Staff also pick up children to attend the club from Rimbleton, South Parks and St. Paul's Primary Schools each day. Children are met at school and walk with the staff team to Caskieberran Primary School and relevant risk assessments are in place to keep children safe.

Children are cared for in a designated playroom and can use the school toilets and the gym hall. They have direct access to one of the school playgrounds and the premises are surrounded by woodland spaces. There are local parks and other amenities close by.

About the inspection

This was an unannounced inspection which took place on Wednesday 11 December 2024 between 14:45 and 18:30. The inspection was carried out by one inspector 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 14 children
- received feedback from three of their family members
- spoke with three staff and the manager
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm, kind and caring support from staff who nurtured their emotional wellbeing and respected their needs, rights and choices.
- Each child had a detailed personal plan that helped staff to offer them the right support at the right time.
- Children enjoyed good quality play and learning experiences where they could be creative and imaginative.
- Children played in a mostly safe, clean and well-maintained setting.
- Children would benefit from having access to a better range of open-ended resources for play that stimulate their curiosity and problem-solving skills, both indoors and outdoors.
- Staff and leaders had implemented good quality assurance systems which improved children's experiences and where some further changes would promote a culture of continuous improvement.
- Recent changes in the staff team had been positive and we encouraged them to continue developing teamwork and communication so children consistently experience continuity of care.

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

Children were nurtured and supported through their daily experience by staff who knew them well. Staff supported children with warmth, kindness and compassion while also promoting a sense of fun and enjoyment through play. Staff also responded sensitively to children's needs and requests, respecting and valuing their right to be heard. Children were also encouraged to be supportive and kind to each other in play. We discussed ways that staff could work with children to set expectations for how everyone should be treated and supported in their care, play and learning. Working together to have shared values would ensure everyone feels valued, respected and included in a safe and compassionate environment.

All children had a personal plan in place that detailed their needs, rights and choices and these had been updated regularly. Children's ideas were recorded and staff were acting on these when planning children's experiences, respecting and valuing their contributions in a meaningful way. Information recorded about children's needs helped staff to understand how to offer them the right support at the right time. This included where children had allergies or other medical needs. As a result, they were supported to remain safe and healthy. Families had also been included in developing their child's personal plans, especially where children needed some additional support to be fully included and achieve their potential. In addition, there were good relationships with other professionals so that children experienced consistency and continuity of care across the day. Staff had developed some new systems for personal planning and we encouraged them to reflect on how well they help them to meet children's needs, rights and choices. By considering this over time, they can adapt any of their approaches to ensure children and families remain fully included in developing children's personal plans.

Children were involved in choosing and preparing their own snacks most of the time. They were encouraged to cut and prepare fruit as well as serve themselves their own drinks. Staff also frequently consulted with them about what types of snacks they would like and planned this across the week to be balanced nutritionally. We encouraged staff to consistently support children to be independent during snack experiences, developing skills for life and positive relationships with food. This includes spending quality time with children during snack experiences in genuine, warm discussions that help them get to know children better. Children also told us that they wanted a better variety of snack options and we encouraged the team to broaden their understanding of relevant guidance to achieve this.

Quality indicator 1.3: Play and learning

Children were able to lead their own play and learning in the club, choosing where they played, who they played with and what activities they wanted to be included in. Children were creative and imaginative in their play, making up their own games and rules together. Several children spent lots of time being creative with arts and crafts and there were also opportunities for children to spend time quietly on their own if they felt overwhelmed. Staff supported children to do this quickly and sensitively. This respected each child's right to choose their own play and respond to their own needs at any given time.

There was a good range of play and learning experiences for children to enjoy. Children told us that they enjoyed spending time in the club, making new friends and being active outdoors. Staff were also finding more opportunities to be in the local community which was beginning to enhance children's experiences. Children's interests and ideas were used as the basis for most planned play and learning experiences, while also encouraging children to learn new things. We encouraged staff to continue developing the balance between planned and spontaneous play experiences that promote curiosity, creativity and imagination. This includes considering longer term projects, for example, local community engagement and support that enriches children's lives.

Staff had developed a clear and simple way of recording and celebrating children's play and learning, using displays and 'floorbooks' to share their achievements. This was recorded for the group as a whole as well as for individual children so everyone's ideas were respected and valued. We discussed how staff could begin to use children's rights as a way of observing and planning for play, extending and broadening their learning in a meaningful way. This will ensure children develop a strong understanding of how their rights are being met through the experiences they enjoy.

How good is our setting? 4 - Good

We made an evaluation of **good** for this key question where we identified strengths and some improvements would maximise children's wellbeing.

Quality indicator 2.2: Children experience high quality facilities

Children played in a mostly clean, safe and well-maintained setting that was planned to meet their needs, rights and choices. There was ample space for children to be active, be creative and to rest and relax, if this is what they wanted. Staff had developed attractive displays that shared and celebrated children's achievements, communicating to children that they matter and that they were valued and respected. Children also had free flow access to outdoor play which increased their level of choice and independence. There were some open-ended resources available for play which children used creatively and imaginatively in fun and exciting play. These resources were used best by children in play and we encouraged staff to build on these types of resources. This would support children to expand their problem solving skills and create more fun, excitement and challenge in their play.

Children were kept safe and healthy because staff implemented the detailed risk assessments that had been developed. These recorded potential hazards as well as safety measures that needed to be in place to reduce any risk of children coming to harm. Children were also beginning to be included in understanding risk. For example, children who had permission to walk home alone had developed a safety plan with staff so that they developed skills for life while understanding how to keep themselves safe. This showed a tailored approach to meeting children's needs while offering an enabling experience that developed skills for life. We encouraged staff to expand this approach across other aspects of children's experiences so they can all learn skills that help them to be responsible and independent.

Staff had implemented appropriate infection prevention and control measures to keep children safe and healthy. For example, children were encouraged to wash their hands and tables were cleaned after children had finished their snack. The playroom was visibly clean and any damaged equipment was removed. Staff reported maintenance issues quickly to ensure the premises were well-maintained. We encouraged staff to regularly review and audit the quality of the premises so they can inform the provider of any refurbishment that may be required due to wear and tear.

How good is our leadership? 4 - Good

We found important strengths that clearly outweighed areas for improvement in this key question. This contributed to positive outcomes for children and, therefore, we made an evaluation of **good**.

Quality indicator 3.1: Quality assurance and improvement are led well

Children experienced good quality care, play and learning that was based in the values of nurture, respect and fun. Staff encouraged them to be independent, feel respected and be included in leading their own experiences. This vision for children's care, play and learning promoted positive outcomes and supported children to achieve their potential. Staff planned to include children and families in developing a shared vision with values and aims that reflected what matters most to them. We agreed that this would be a positive experience for everyone, creating a strong sense of belonging and ensuring life in the setting was relevant and meaningful to their lives.

Children were being included in planning some aspects of their experiences, for example, the snack menus and the play experiences on offer. Families had also been offered some opportunities to give feedback, asking their views and opinions on changes that would improve the service. Staff had recognised that this was an area they wanted to improve further and we discussed a variety of ways this could be achieved. There were also opportunities to broaden the range of ways they consulted children on their views, capturing the ideas of all children to influence change. For example, observing children's actions, emotions and words and aiming to understand this in a meaningful way will help them to respect each child's right to be heard, including through their non-verbal communication.

Staff and leaders had developed quality assurance processes that had successfully achieved improvements across children's experiences. The three areas for improvement we had identified in the last inspection had all been met, showing a good capacity to improve across the team. More information on these can be found under 'What the service had done to meet any areas for improvement we made at or since the last inspection.' Leaders had acted quickly to make appropriate changes that promoted positive outcomes for children, in line with national expectations. Staff were beginning to use relevant best practice guidance to improve their practice and we encouraged leaders to use this when offering feedback to staff. This will ensure that staff build their confidence as professionals and take a lead role in making informed changes that improve children's care, play and learning. By including staff in planning for improvement, a strong culture of continuous improvement will develop that has the most positive impact possible for children and families.

How good is our staff team? 4 - Good

We evaluated this key question as **good,** where performance impacted positively on children's outcomes and this outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

Staff worked well together most of the time to meet children's needs, respect their rights and promote their levels of choice and independence. There had been some changes in the staff team since the last inspection and this was impacting positively on children's experiences. Leaders had carefully considered the skills and experience of staff as well as their wellbeing when making these changes. This ensured that children experienced consistency and continuity of care in a positive working environment. Staff also used time away from children to ensure they were up to date with any changes to children's needs, promoting positive outcomes.

Staff were still developing as a team and had begun to share roles and responsibilities in a way that supported children's needs. They were still learning about each individual's strengths and sharing their expectations across the team. We encouraged them to continue discussing, reflecting and evaluating their teamwork, building trust and confidence in each other, so that key tasks are completed effectively.

Leaders had a good understanding of promoting staff attendance at work which ensured children were supported by familiar people almost all of the time. When temporary staff were needed to cover planned and unplanned absences, these were people that children regularly spent time with. The staff model also carefully considered the needs of children, for example, bringing staff and children from other settings to enhance their experiences and build new friendships while ensuring minimum ratios of staff to children were met. The deployment of staff was more complex in this setting due to the arrangements for collecting children from four different schools. This meant that time for staff to communicate before each session was limited. We encouraged staff to build well-embedded communication methods that ensure all staff have a good understanding of any changes or events. This will further improve the consistency and continuity of care children experience and build on the shared vision, values and aims they develop in the coming months.

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

To offer children consistency and continuity of care, the provider should ensure all children have an effective personal plan which is implemented by staff. This should include, but is not limited to:

a) personal plans that are understood by children, families and staff
b) personal plans which have been developed in collaboration with children, families and other relevant people
c) personal plans which take account of children's individual needs, preferences and choices
d) personal plans that show how staff will plan to meet these needs, preferences and choices
e) personal plans which are working documents to promote consistency and continuity of care
f) personal plans which act as a tool for managing risk, including the development of chronologies.

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 is to ensure staff skills and knowledge is consistent with the Care Inspectorate document, 'Guide for providers on personal planning: Early learning and childcare.'

This area for improvement was made on 14 December 2023.

Action taken since then

Each child had a detailed personal plan that helped staff to meet their needs, rights and choices. These were working documents that assessed risk in order to keep children safe and healthy. We were confident that children's personal plans were supporting them to experience positive outcomes.

This area for improvement has been met.

Previous area for improvement 2

To include children and families fully in developing the service, the provider should regularly and meaningfully consult them on what the service does well, how they know and what they could do better. This should include opportunities to be involved in quality assurance systems and improvement planning, where appropriate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7).

This area for improvement was made on 14 December 2023.

Action taken since then

Staff and leaders had frequently offered children and families opportunities to give feedback and influence change. For example, children's interests were used to plan play and learning. Families had been sent questionnaires to offer feedback and this was beginning to include them. Staff planned to continue improving this aspect of their practice and had plans to achieve this in the coming months. We were confident that sufficient progress had been made to include children and families in developing the service.

This area for improvement has been met.

Previous area for improvement 3

To ensure children and families receive a high quality of experience that continues to improve, the provider should put in place quality assurance systems that support staff to self-evaluate. They should create plans for improvement which impact positively on practice. These should be tailored towards children and families' particular needs and choices and include plans for staff professional learning and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'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 14 December 2023.

Action taken since then

There were quality assurance systems in place that had led to improvements in children's experiences that promoted positive outcomes. There was an improvement plan in place that helped leaders to keep track of improvements, while supporting staff to begin reflecting on their own practice. While further improvements would maximise children's wellbeing, we were confident that sufficient progress had been made to offer children good quality care, play and learning.

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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