Wee Gems Ltd
Day Care of Children

6 Dunnet Way
East Mains Industrial Estate
Broxburn
EH52 5NN

Telephone: 01506 857 325

Type of inspection:
Unannounced

Completed on:
18 April 2024

Service provided by:
Wee Gems Ltd

Service provider number:
SP2005007239

Service no:
CS2005089340

About the service

Wee Gems Ltd is registered to provide a service to a maximum of 110 children aged from birth to not yet attending primary school; of those 110 children, no more than 43 can be under two years. The provider is the Bright Stars Nursery Group. The nursery is situated on the outskirts of an industrial site in Broxburn. The ground floor accommodation has four playrooms which all benefit from enclosed outdoor play spaces. The service is close to local shops and parks and has good transport links.

About the inspection

This was an unannounced inspection which took place on Wednesday 17 April 2024 between the hours of 09:00 and 16:45. We returned to complete the inspection on Thursday 18 April 2024 between the hours of 09:00 and 14:00. 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 the last inspection report, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:
- received 12 responses from parents to our electronic request for feedback
- received three responses from staff to our electronic request for feedback
- spoke with and interacted with children
- spoke with staff and management
- observed practice and daily life
- reviewed documents relating to children's care and learning and the management of the service.

We provided in-person feedback to the service on Thursday 18 April 2024. In attendance were the registered manager and an area manager.

Key messages

Four areas for improvement had been met following the previous inspection as progress had been made in relation to planning approaches, the babies outdoor space, quality assurance and staff to child ratios.

A dedicated manager and cohesive staff team resulted in improved outcomes for children.

Improvements had been made to the physical presentation of the nursery which helped increase children's sense of worth.

Children were actively involved in leading their play and learning and were confident to use the spaces as they wished.

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 generally experienced warm, nurturing interactions with staff. As the inspectors were unfamiliar to the children, the younger children appropriately sought reassurance and comfort from staff. This was reciprocated, which meant that children's emotions were validated and indicated that children viewed staff as a safe base. Staff were aware of children's individual routines and preferences and accommodated these, for example after waking from sleep, a younger child liked to be offered their bottle of milk. The staff member rocked the child in their arms in a soothing manner during this feeding routine, providing eye contact and communicating. Parents' comments included; "My children feel comfortable and secure with the staff". The service was committed to continuing to invest in staff knowledge and skills to help ensure all children consistently experience high quality interactions with staff that reflect a strong value base.

Mealtimes had a relaxed pace and were an enjoyable social experience for children. Staff sat alongside children and engaged in conversation, offering praise and encouragement. Staff represented positive role models as they ate with children. This supported children to develop a healthy relationship with food. Effective systems were in place to ensure children's individual cultural and dietary needs were met. This included the use of coloured plates and labelled mats. Staff had clear roles and took ownership of these. This successful teamwork during mealtimes helped promote children's safety and health.

Children were consulted with in relation to transitions to other playrooms. This promoted children's autonomy and meant that arrangements respected children's individual pace. We noticed that a child decided not to visit the pre-school room and another child chose not to return to the toddler room. These responsive approaches upheld children's right to be heard and involved in decisions that affect them.

Personal plans had been developed into more meaningful, working documents. Parents were involved in assessing their child's needs using the wellbeing indicators. This strengthened partnership working increased opportunities for children to experience continuity in their care and learning between home and nursery. The service was committed to embedding quality assurance systems. This would help ensure all children's personal plans are completed in depth and that children's individualised support strategies are consistently reviewed in a way that demonstrates the impact they have had on improving outcomes for children.

The management of children's medication reflected best practice documentation. Regular audits provided assurance that medication was within date, stored appropriately and accompanied by comprehensive health care plans. This meant that children could have confidence that staff were well equipped to help ensure their health and wellbeing.

Quality indicator 1.3 Play and learning

Children were actively involved in leading their play and learning and were confident to use the spaces as they wished. For example, some of the older children used their initiative to transport resources and rearrange equipment to create an obstacle course. Staff demonstrated curiosity towards children's own play agenda, which empowered children to have a sense of ownership of the playroom and to freely express their creativity. Children played cooperatively with their peers using open ended resources, including cardboard boxes and crates to build an aeroplane. Staff skilfully extended children's ideas by facilitating conversations about children's own experiences of holidays within which children recollected airline logos. Staff developed children's literacy skills by inviting the children to design their own airline logos for their aeroplane. These child centred play approaches enabled children to become confident individuals and successful learners.

Recent training on provocations (the display of resources to inspire children's play and learning) was having a positive impact. A well-designed Spring themed provocation around planting sparked children's interest. Children engaged in conversation about the 'smooth' and 'fragile' petals which they then decided to cut up and use to create potions. These valuable learning opportunities contributed to a stimulating environment which supported children to engage in sustained, purposeful play of their choosing. Parents' feedback included; "The experiences provided always seem age and stage appropriate, inspiring my child's curiosity. My child has been involved in sand and water play and equally enjoys playing with role play items, they also have nice quiet pockets of the day on a 1:1 or in a small group of children with a staff member just enjoying a story book".

Opportunities were often provided to develop children's numeracy and literacy skills. These included skilful interactions within which staff extended children's thinking skills, for example learning about over and under through child centred play. Environmental print was evident around the pre-school playroom through the use of signs and text. Moving forwards, the service had identified that they wanted to develop this within the toddler room to help enhance children's literacy skills.

Child centred planning approaches had improved to better reflect the learning value. Staff were more mindful of how learning opportunities offered children developmental challenge and reflected children's next steps within their personal planning and online learning journals. For example, staff noticed that some of the younger children were ready to develop their skills to eat independently. Increased opportunities for children to develop their fine motor skills through play were provided within the environment. Staff noticed a common theme within the play of some of the older children. This developed into an exploration of mythical creatures. In this way, planning more meaningfully extended children's individual and collective interests and celebrated children's significant learning.

Staff generally demonstrated good interactions which promoted children's creativity and curiosity. Staff extended children's thinking skills by supporting children to problem solve, for example predicating 'how many more bricks' during block play. Staff were animated when singing songs and storytelling which resulted in enthusiastic engagement from children. We noticed that because the outdoor environment for the pre-school children was not proactively set out for children on day one of the inspection, there were missed opportunities for staff to extend these quality interactions into the outdoor environment. The service was committed to using quality assurance approaches to help consistently secure positive outcomes for children regardless of whether they play indoors or outdoors.

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

Improvements had been made to the physical presentation of the nursery. New flooring had been laid and paint work undertaken. The natural, neutral colour scheme along with soft rugs contributed to a relaxed atmosphere. All these positive changes enhanced children's sense of worth.

Following the decoration work, the staff team had reflected on the layout of the indoor environments. These were evolving to become more sensitively structured and to take account of all children's stages of development and learning. Within the baby room, new flooring had resulted in increased opportunities for sensory play.

Children's health benefited from improvements to hand washing facilities. A new sink was located within the older children's mealtime area. This resulted in more seamless transitions to mealtimes and helped to reduce the potential risk of cross contamination, as children's seating was within close proximity. A portable sink in the baby playroom had been replaced with a permanent fixture. This meant that younger children had more space to wash their hands, so children could associate self-care skills and good hygiene practice as a positive routine.

In general, the service was clean and well maintained. However, we highlighted some improvements that needed to be made, for example ensuring air vents and surfaces in all toilets are free from dust which can harbour germs. The service acted promptly on this. We had confidence that improvements would be embedded and sustained for the benefit of children's health and wellbeing.

The service had increased opportunities for babies to go for walks in the community. These outdoor experiences reflected children's interests, for example outings provided opportunity for children to develop schematic play by making meaningful learning connections with vehicles. The service had plans to develop the baby garden space. We encouraged the service to take these forward in a timely manner to help promote child led learning outdoors and increase children's health and wellbeing through daily access to fresh air. As mentioned within quality indicator 1.3 play and learning, we had confidence that the service would develop the pre-school garden to ensure this is consistently set up and that learning opportunities and interactions enhance children's development.

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 improvement are led well

A dedicated manager and cohesive staff team resulted in improved outcomes for children. A sense of unity amongst the team positively impacted on staff morale. In turn, this contributed to a pleasant and relaxed atmosphere which benefited children's wellbeing.

The manager was successfully building staff confidence to make well-informed, positive change which created a sense of ownership. The manager had noticed that staff were less dependent upon following her lead, feeling more empowered to identify solutions themselves first. Staff had applied knowledge and skills from training on provocations and this had inspired children's play and learning.

A skilful approach was used by the manager to improve practice. An example of this was the investment made to improve children's mealtimes. This including training tailored by the manager along with the manager role modelling practice, mentoring and coaching staff in practice and then undertaking practice observations to measure the effectiveness of the changes made. Our inspection findings, as documented within quality indicator 1.1 Nurturing care and support, highlight the positive impact of these improvements on outcomes for children.

Opportunities had increased for staff to engage in reflective practice to build their skill set and knowledge. This was having a positive impact on outcomes for children; for example, distributive leadership was promoted amongst the staff team. The manager had delegated responsibility to room leads to undertake medication audits. This was proving effective as inspection findings showed that the management of medication reflected best practice guidance. The manager assigned mentoring tasks for senior staff members to undertake with less experienced staff. The manager then followed up on this to assess both staff member's skill set and knowledge and highlighted the impact on outcomes for children. Staff engaged in support and supervision sessions facilitated by the manager. The manager was receptive to our advice to ensure that the action plan from the previous session is followed up at the next meeting. This would help build a culture of accountability and ownership.

Parents' comments included; "We have been invited regularly to feedback on improvements to the nursery and parent input is always encouraged and welcomed. I have felt fully included on the journey of service development of Wee Gem's. They have taken the parents with them" and "This is a fabulous nursery that clearly have worked really, really hard to turn things around from a previous inspection and culture. We like their nurturing pedagogy/ethos along with their natural approach to integrity and commitment to the children in their care".

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

The service was appropriately staffed as it was recognised by leaders as essential to the wellbeing of children. Staff to child ratios were maintained during the inspection and from registers we assessed. Staff shift patterns had changed to help promote continuity for children. The service had noticed the positive impact of this, including children settling more successfully as they developed secure attachments with familiar staff.

The individual needs of children were met by a team which reflected a mix of knowledge, skills and experience. Staff undertaking qualifications were paired with more experienced staff. The learning culture within the service helped staff to feel more comfortable to share their goals and aspirations with colleagues. Staff critiqued each other's practice in an empowering, supportive manner. For example, sharing feedback on children's observations so these were meaningful and helped demonstrate children's progress.

Staff deployment generally reflected children's individual needs. For example, where children required more individualised support, this was provided on a one-to-one basis. In general, staff were effectively deployed during busier times of the day, for example during mealtimes. The service was committed to ensuring this is consistent across all the playrooms. This would be particularly beneficial in the baby room, where naturally children's emotions can become heightened as they feel tired and benefit from increased staffing resource to provide emotional containment. Staffing numbers within the pre-school room could be improved to create more flexibility to support free flow play outdoors. The service informed us that they had proactively identified these gaps and had applied for additional staff to be recruited.

Arrangements for absence, whether planned or unplanned, were managed more effectively to support minimum disruption to children's routines. For example, sessional staff had been recruited who were familiar with the service's ethos and procedures. Key worker duties were allocated to other staff during annual leave. These initiatives helped to promote continuity of care for children and assisted the smooth running of the service. There was a positive ethos of attendance within the service which further enabled children to build secure attachments with staff.

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 support children's care, learning and development, the provider should develop and embed planning approaches to ensure these reflect staff skill and knowledge.

This should include but is not limited to assessing children's needs in greater depth within their personal plans and using this information to outline support strategies and strengthen partnership working. Also, demonstrating within responsive planning approaches and observations how staff have added value through quality interactions and the use of resources to help children to progress well.

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 '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).

This area for improvement was made on 18 August 2023.

Action taken since then

Personal plans had been developed into more meaningful, working documents. Parents were involved in assessing their child's needs using the wellbeing indicators. This strengthened partnership working increased opportunities for children to experience continuity in their care and learning between home and nursery. The service was committed to embedding quality assurance systems. This would help ensure all children's personal plans are completed in depth and that children's individualised support strategies are consistently reviewed in a way that demonstrates the impact they have had on improving outcomes for children.

Child centred planning approaches had improved to better reflect the learning value. Staff were more mindful of how learning opportunities offered children developmental challenge and reflected children's next steps within their personal planning and online learning journals.

This area for improvement has been met.

Previous area for improvement 2

To support children's care, learning and development, the provider should increase the use of and design of the babies' outdoor space.

This should include but is not limited to ensuring that the garden is set up and experienced by children on a daily basis. Also, pursuing plans to extend the garden area so children have ample space to move and can engage in a greater variety of experiences that reflect a broad range of skills.

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 play outdoors every day and regularly explore a natural environment' (HSCS 1.32) and 'I have enough physical space to meet my needs and wishes' (HSCS 5.20).

This area for improvement was made on 18 August 2023.

Action taken since then

The service had increased opportunities for babies to go for walks in the community. These outdoor experiences reflected children's interests, for example outings provided opportunity for children to develop schematic play by making meaningful learning connections with vehicles. The service had plans to develop the baby garden space. We encouraged the service to take these forward in a timely manner to help promote child led learning outdoors and increase children's health and wellbeing through daily access to fresh air.

This area for improvement has been met.

Previous area for improvement 3

To support children's care, learning and development, the provider should build upon quality assurance measures to increase staff skill and knowledge in achieving positive outcomes for children.

This should include but is not limited to continuing with the management presence in the play spaces to mentor and coach staff in the moment, to develop their practice whilst working alongside children. Also, embedding staff practice observations and support and supervision to ensure practice is child centred and focuses on the impact on outcomes for children.

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 18 August 2023.

Action taken since then

The manager was successfully building staff confidence to make well-informed, positive change which created a sense of ownership.

Staff had applied knowledge and skills from training on provocations and this had inspired children's play and learning.

A skilful approach was used by the manager to improve practice. An example of this was the investment made to improve children's mealtimes.

Opportunities had increased for staff to engage in reflective practice to build their skill set and knowledge. This was having a positive impact on outcomes for children.

This area for improvement had been met.

Previous area for improvement 4

To support children's care, learning and development, the provider should ensure effective staff to child ratios.

This should include but is not limited to ensuring minimum recommended ratios are planned for and met at all times, planning staff to child ratios so there is a healthy mix of staff skill and experience at all times and planning staff to child ratios so these enable staff to be sensitively attuned and fully responsive to meet children's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15) and 'People have time to support and care for me and speak with me' (HSCS 3.16).

This area for improvement was made on 18 August 2023.

Action taken since then

The service was appropriately staffed as it was recognised by leaders as essential to the wellbeing of children. Staff to child ratios were maintained during the inspection and from registers we assessed. Staff shift patterns had changed to help promote continuity for children. The service had noticed the positive impact of this, including children settling more successfully as they developed secure attachments with familiar staff.

The individual needs of children were met by a team which reflected a mix of knowledge, skills and experience.

This area for improvement had 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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.