Croftcroighn Nursery
Day Care of Children

Avenue End Campus
290 Mossvale Road
Glasgow
G33 5NY

Telephone: 01417 743 760

Type of inspection:
Unannounced

Completed on:
17 November 2023

Service provided by:
Glasgow City Council

Service provider number:
SP2003003390

Service no:
CS2006135974

About the service

Croftcroighn Nursery is registered as a daycare of children service. The service is provided by Glasgow City Council to provide a care service to a maximum of 10 children with complex needs.

The service is based within a shared campus with Croftcroighn Primary School and Avenue End Primary School.

Children have access to one main playroom, an enclosed playground they share with the school, a sensory garden, a hydrotherapy pool, soft playroom and dining hall. They also have use of a minibus to access the local community.

About the inspection

This was an unannounced inspection which took place on 16 and 17 November 2023 between 09:00 and 17:00. Two inspectors carried out the inspection.

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.

To inform our evaluation of the service we:

- observed practice and daily life
- spoke with three children using the service
- gathered the views of two parents
- reviewed documents
- spoke with the head teacher and staff.

Key messages

- Children were well-supported by a dedicated staff team who were skilled in their approach to meeting the needs of children.
- Children were exploring and playing in the nursery environment. They were benefiting from the range of experiences they accessed throughout the session.
- The provider should ensure that there is suitable storage space for children's specialist equipment.
- Staff should consider best practice guidance in relation to hand washing.
- Staff plan to further develop opportunities for children to play and explore the natural environment and develop community links.

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 evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Staff were skilled in their approach to supporting children. Interactions were warm, caring and nurturing. The staff approach to meeting the needs of children was consistent across the team to give children continuity. The use of visuals and giving children choice was supporting children's rights. Children were given visuals to explain the timetable for the day. As some children were non-verbal, staff were picking up on body language, being hand-led and children were using their eyes to make choices. There was a vision impairment teacher skilled at working with children who used eye movements to communicate. This helped staff to offer choice and give children a voice.

The lunchtime experience for children was well planned and supported by staff to give children the opportunity for a social lunch experience in the campus dining hall. Staff commented that they wanted to support families by familiarising children with mealtime routines to make it part of their routine. Staff shared that children had made good progress and were benefiting from this opportunity. Some children had limited diets. We asked the staff to consider a quiet space for some of the children's food to ensure that the children were given the best possible opportunity to try new foods and eat food at mealtimes as well as offering the social experience.

We signposted staff to current best practice in relation to hand washing. Children and staff should wash hands before and after lunch. Staff made use of personal protective equipment (PPE) at lunchtime. However, the use of gloves at this time would not substitute handwashing. The location of the dining hall to the hand washing facilities should also be considered. This will help to minimise the spread of infection.

Personal plans were in place for all children. New templates were introduced and these contained important information about the children and how to support them to reach their full potential. Plans were reviewed with families and targets were agreed, this ensured that parents were involved in planning to meet children's needs. Staff indicated information that was relevant to children's individual care; this should be recorded on the plan to help the planning cycle. Individual risk assessments could also be expanded to ensure a consistent approach to supporting children to be safe. We signposted staff to personal plan guidance.

Where children needed medication there were policies and procedures in place to ensure medication was stored and administered safely. Health and wellbeing workers were in post to deal with children's health needs and staff had received training and support for using specific equipment or administering life saving medication. We signposted the service to best practice guidance in relation to medication. The child's date of birth and a photograph would make it clearer for staff to quickly identify medication. The local authority form does not support when to record first dose or if a child spits out or refuses medication. Expansion of the information would ensure that all information is recorded clearly.

We saw children go for rest and sleep in a communal space. The service should ensure that they consider best practice in relation to safe sleep and good sleep hygiene. We signposted the service to safe sleep guidance. This should be considered when planning spaces for sleep.

Quality indicator 1.3 Play and learning

Children had the opportunity to play and explore a range of toys and play experiences. Staff exposed children to a range of sensory experiences. We saw the children exploring the room, exploring the outdoor environment and using their bodies in different ways. Visuals and touch were stimulating children's curiosity. Staff were looking out for body language and expression to determine how children were feeling about the activities offered to them. This gave indicators for future planning and extension of experiences.

Intentional planning was in line with the school community's long term plan. For example, children were learning about their home and transport. Activities planned linked to children's individual targets. Evaluations of the children's individual experiences and links to the curriculum were made. We highlighted that responsive planning could be further developed to track children's play and learning journeys, achievements and next steps.

Children had the opportunity to access outdoor play. The playground had a range of physical resources including swings and a slide and spinning toys. These were meeting a range of sensory needs for children. Staff highlighted that children would benefit from further opportunities to develop community links and possibly link with other nurseries. Children would also benefit from playing and exploring a more natural environment with resources that spark curiosity.

How good is our setting? 4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

The nursery was warm welcoming and spacious for children. There was good ventilation and plenty of natural light which created a positive environment for children. The layout of the environment and the storage of resources took account of the individual needs of the children attending the nursery. Resources and toys reflected children's special interests and preferences and this helped to engage children in the nursery environment. There were lots of visuals and prompts to support children with communication and to allow them to make choices. This showed that the service had a rights-based approach to meeting the needs of children.

There were cosy corners and safe spaces where children who were not mobile could spend time on the floor for therapy and physical movement to support their wellbeing. Children had access to other facilities across the school campus. These included a hydrotherapy pool, soft playroom, sensory space and a shared playground and sensory garden. The shared playground could be further developed to offer more visuals and resources to stimulate children's curiosity. There was an additional garden space that could extend children's natural outdoor play opportunities, there were plans to further develop this space.

As a service providing care to children with complex needs, for some children there were pieces of equipment to aid their mobility and physical development. This included various chairs and standing frames and buggies. These were stored, close to children, in the toilet area. The equipment should be stored close to children, however, staff should consider infection prevention and control guidance and store the equipment safely. Furthermore, clean washing should be stored outwith the toilet area (see area for improvement 1).

The provider should ensure that maintenance is actioned in response to requests. This will ensure that play spaces are safe and secure for children. The lock on the soft playroom should be repaired as soon as possible to ensure the safety of children and allow staff to support children.

Areas for improvement

1. The toilet area should not be used for storage of children's equipment or clean washing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (5.22).

How good is our leadership? 4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality indicator 3.1: Quality assurance and improvement are led well

There was a clear vision, values and aims for the service that reflected the varied needs of the children attending. The nursery was valued as a key part of the wider school and involved in whole school meetings and personal staff development. This enhanced staff practice and allowed staff to work collaboratively to meet the needs of children. The nursery, as an individual entity within the school, had been re-established, as the role of the children had changed - nursery aged children had linked with primary one previously. This had resulted in a newly developed staff team who were continuing to work well together to ensure that children were well-supported to reach their potential.

The staff team felt valued and motivated. They were well-supported by the management team and staff were encouraged to take lead roles across the service to enhance their own knowledge and skills. This was having a positive impact on outcomes for children. There was a clear improvement plan in place to support staff to develop and improve the service for families. Priorities included a whole school approach to the recovery from the Covid-19 pandemic. This included developing positive relationships and re-establishing links and routines that had benefited children's wellbeing previously. The measure of success was the happy confident children who were continuing to thrive attending the nursery. Staff shared children's individual progress and the strategies they had put in place to help children overcome challenge.

The service should continue to develop and improve the ways that they involve families in the improvement journey along with self-evaluation. The service was using Seesaw as a platform to enhance communication with families, this will continue to enhance the ways they can involve the families. The service could also benefit from stronger links with the early years community and best practice guidance relating to young children's experiences. There were plans to establish links with local nurseries and to share learning and knowledge, in turn this will enhance the experience for children.

How good is our staff team? 5 - Very Good

We evaluated this key question as very good, where there were major strengths that were impacting positively on outcomes for children.

Quality indicator 4.3 Staff deployment

There was a committed and skilled staff team available across the day to meet the individual needs of children. As a nursery class supporting children with complex additional needs, the staff team brought a varied range of skills to the nursery. They had very good links with visiting professionals and this supported children's overall wellbeing and development. Working collaboratively ensured that children were given the right support at the right time. Throughout the day, there were enough staff in place to meet the needs of the children. Some tasks to support individual children needed two staff to assist. Staff were good at communicating with each other to ensure that the children were well-supported. They had a very flexible approach to meeting the needs of children and this was evident through observations of staff practice.

Staff worked closely with families. Children were mostly transported to and from nursery by taxi, however, staff made sure they factored in time to meet with parents to establish good links. This supported good relationships with children and families. It also made families feel welcomed and part of the nursery community.

Staff were motivated and committed to providing a high quality play and learning environment where they offered a varied programme of activities to promote curiosity, communication and independence. This was evident in the close relationships and interactions we saw between staff and children. Staff ensured children had a varied programme and used the range of spaces across the wider school campus to enhance the experience for children. Well planned transitions to and from different areas gave children different experiences to widen their world.

There were regular opportunities for staff to meet to discuss the individual needs of children. Staff were well-supported by the management team and there had been activities to support staff team building. This had impacted positively on staff morale and helped to promote a positive ethos within the service. The nursery was very much part of the whole school community, and they would continue to benefit from wider links within the early years community.

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 request for, and storage of, paracetamol based medication for all children should be reviewed and updated to take account of the current best practice guidance Management of medication in daycare of children and childminding services.

This is to meet the health and safety of children in attendance at the service. National Care Standards Early Education and Childcare up to the age of 16: Standard 3: Health and Wellbeing.

This area for improvement was made on 11 January 2017.

Action taken since then
Medication was in line with current best practice guidance.

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?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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