Currie Children's Day Nursery
Day Care of Children

Riccarton House
79 Riccarton Mains Road
Currie
Edinburgh
EH14 5NB

Telephone: 07852 463 004

Type of inspection:
Unannounced

Completed on:
11 January 2024

Service provided by:
Claylands Private Nursery Limited

Service provider number:
SP2003003496

Service no:
CS2008190468

HAPPY TO TRANSLATE

About the service

Currie Children's Day Nursery can provide a daycare of children service to a maximum of 76 children not yet of an age to attend primary school, at any one time. Of those 76 no more than 20 are under the age of two years.

The service is delivered from a converted detached house on the edge of Currie, Edinburgh. Children aged two and above are accommodated in two playrooms on the ground floor. Children under two are in two playrooms upstairs. Two garden areas are accessed from the ground floor. Parking is available and the area is serviced by local transport.

There are two registered managers in the service however this report will refer to the manager for ease of reference.

About the inspection

This was an unannounced inspection carried out on Monday 08 January between 09:10 and 16:45. We returned to complete the inspection on Tuesday 09 January 2024 between 09:05 and 15:40. One inspector from the Care Inspectorate carried out this inspection.

To prepare for the inspection we reviewed information about the service. This included previous inspection reports, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:
- spoke with children using the service and received feedback from 16 parents
- spoke with staff and management
- observed practice and daily routines
- reviewed documents relating to children's care and the management of the service.

We gave feedback to the manager and a representative from the local authority by videocall on Thursday 11 January 2024.

Key messages

The health and wellbeing of children benefited from positive relationships and warm interactions throughout daily routines.

Personal planning should continue to improve to ensure consistent care for children which can be evaluated for effectiveness.

Children had a good range of play experiences available to them, however outdoor play should be enhanced in quality and frequency.

A comfortable and welcoming environment was provided for children. However, the outdoor spaces should be enhanced to ensure children are challenged, engaged and stimulated.

Children, staff and parents were nurtured by an inclusive and collaborative approach.

Children benefited from staff recognising and building on each others strengths and supporting each other to do their best.

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 by responsive routines, calm and kind interactions and a rights-based approach in all rooms. They were involved in their own care with staff asking permissions and moving at a pace to support children to make choices. For example, they could choose either to join in for lunch or continue to play. Staff noticed when children needed something and responded appropriately. For example, they were listened to and were cared for with warmth and compassion. This resulted in children being settled and happy. Parents appreciated the relationships between staff and their children. One said, "(The service) seems very personal. Due to its small size maybe, the staff know the children well. It's often the same staff in the room so my child has a consistent and stable relationship with them and they learn their quirks".

Mealtimes were safe and sociable for children as staff interacted with them whilst being vigilant for potential risks. The quality of learning experiences during these times were inconsistent across age ranges. Opportunities to develop life skills such as preparing and serving food should be enhanced.

Children's individual wellbeing was mostly benefiting from the use of personal planning. Their needs and preferences were known by staff. This meant that staff were informed enough with up to date information to meet children's needs. For example, medication and health needs were planned for in detail in line with best practice. Working with other agencies was prioritised to bring the right help at the right time, such as speech and language therapists. In addition, staff were confident in safeguarding children and knew when and how to whistle blow if needed.
However, further development of personal planning was needed to make them working documents. Some plans did not reflect the support children were getting and how they were progressing. This was impacting on continuity of care and capacity to evaluate the effectiveness of the support. The service should revisit the purpose of personal planning with the team. This would help them to reflect on and make changes to how the plans could be used better in children's care.

Quality indicator 1.3: Play and learning

Children had fun as they experienced a wide range of play, learning and development opportunities.
They were engaged across all rooms, exploring freely with their peers and staff. A range of free play and planned learning offered opportunities for children to practice skills and learn new knowledge and concepts. For example, the transformation of ice to water. A parent said, "I am really happy with the variety of play opportunities that the service provides. They have a diverse range of sensory and motor experiences". Daily routines were used as opportunities to support children's decision-making, problem-solving and risk-taking. For example, considering which clothes were needed to play outside. Staff joined in children's excitement and fun, resulting in secure relationships and connections. Younger children's learning was supported through staff commentary, modelling and a child-centred pace. They had freedom to explore and discover, whilst staff offered words and phrases to aid language development. In addition, older children were mostly enabled to extend their thinking and enquiry skills through effective questioning. Moving forward, we

encouraged the service to continually reflect on how the baby rooms manage sleep times. Children who are awake should continue to have access to sufficient space and resources to play.

Planning for learning centred mostly around children's interests and developmental milestones. Children's progress in learning was generally tracked and used to inform activities and experiences. This meant that children were involved in directing their learning. Online observations shared learning with parents and supported staff to plan next steps for children. The service continued to work with the local authority to improve and embed the planning approaches to secure children's progress.

Outdoor play was offered to older children and when the doors were open, they had free flow access. Younger children had limited time outdoors during inspection with babies having none. The service should consider the benefit of fresh air, daylight and a natural environment on the health and wellbeing of children and staff. Free access would enable children to choose where to play and when. The quality of outdoor play should be developed for all children which would increase the use of the space daily (see area for improvement 1 in 'How good is our setting?')

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 quality facilities

The setting was well-furnished, comfortable and homely. Communal areas were welcoming and organised with space for children's belongings. Rooms had natural light, were ventilated and were pleasant places to be. Wall displays were maintained and informative, showing children at play and at home. A sense that children mattered was strong, resulting in them being confident and comfortable at play and rest.

The setting and equipment were generally safe, secure and well-maintained. Infection prevention and control measures were in place and staff were vigilant with children's handwashing. This reduced the risk of infection spread. Room layouts enabled children to be independent and staff supported where needed. However, staff should be more vigilant with closing the downstairs gates to reduce the risk of children moving into other areas unnoticed.

The indoor environments were developmentally appropriate spaces. They were well-resourced and reflected children's stages and interests. Core resources such as sand, water and dough were on offer in all rooms. This indicated staff knowledge of what children needed to flourish. Some areas would benefit from spaces and experiences that invite intrigue and curiosity. This would invite children into play and spark their imaginations.

Outdoor spaces were safe and secure but looked tired. They were not maintained daily and set up for children's learning. For example, a water tray in the babies garden had old water and branches, the mud kitchen had no resources and a build-up of fallen leaves were inhibiting movement for young children. In general, children were not as engaged as they could be which impacted on the time they spent outdoors. The service had already identified outdoor play as an improvement area and this should be progressed as a priority (see area for improvement 1).

Areas for improvement

1. In order for children to thrive, they should have daily access to an outdoor environment which reflects their stage of development and stimulates their curiosity.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state, 'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

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 well led

Staff, parents and children had reflected on the vision, values and aims of the service to ensure they were understood and shared. Daily practice in each room consistently demonstrated the values of respect, rights and compassion. The manager was a driving force of the vision by being present in rooms and accessible to staff and parents. This kept a focus on relationships and connections, whilst giving the manager a general oversight of the service.

Quality assurance, including self-evaluation and improvement plans were in place and were mostly leading to continuous improvements. The manager had a good awareness of staff strengths and areas for professional development. This contributed to a shared leadership approach where staff were starting to take the lead on specific improvements. For example, different staff were recently tasked with developing literacy and numeracy opportunities and outdoor learning. All rooms were able to identify improvements made, why they were made and the outcomes for children. For example, changes to mealtimes and room layouts have meant calmer meals and better play experiences for children. Whilst the pace of improvements has slowed, the service shows capacity to continue their journey forward.

Whilst some quality assurance processes were in place, these could be formalised to ensure they consistently lead to improvements for children. For example, audits were carried out on personal planning but had not highlighted important gaps. A record of the audits and resulting actions to improve aspects of the service should be kept and shared with staff. This would give staff shared responsibility around following up on actions that improve outcomes for children, and in monitoring them and evaluating them for success. Also, the use of best practice documents would guide staff to ensure children's care needs are continually met. For example, having fresh air and physical activity outdoors each day.

Children and families were involved and were starting to influence change within the setting. Various opportunities were available for parents to give feedback and get involved, such as online polls and questionnaires. This feedback had been used to inform change which meant that views were valued. Examples of how parents got involved included open days, stay & play sessions and fundraising events. These allowed parents to feel part of the service and be more involved in their child's early learning. A parent said, "It's a strong management team who are always keen to ask for feedback and improve the service".

Children's voices were evident throughout improvement planning and day to day routines, as staff observed and listened. The use of floorbooks effectively involved children's ideas and wishes and captured a visual process of improvement. This enabled further reflection which informed planning.

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

Deployment and levels of staff were effective in ensuring good outcomes for children. Each room had enough staff to meet the national recommended ratio and safely care for children. Consistent staff offered continuity and familiarity to children, resulting in secure relationships being maintained. Additional staff and management were available to provide cover during transition points in the day such as lunchtime and staff breaks. Staff were also confident to seek support as needed to ensure children's needs continued to be met. This suggested that staff wellbeing needs were considered, resulting in a secure team. A good mix of qualified staff and staff still in training, brought differing skills and experience. They offered guidance and challenge to each other around practice issues, resulting in children's autonomy being respected. Room rotas kept staff organised throughout the day ensuring transition points ran smoothly for children, such as meal and sleep times.

Staff were flexible and supported each other to work as a team to benefit children. Consistent communication kept each other informed of practical tasks and children's needs. This enabled them to mostly fill gaps to ensure good outcomes for children. Moving forward, management should ensure deployment of staff enables younger children to have daily outdoor play.

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 manager should ensure that all information held about children attending the service is reviewed and updated with parents at least once every six months.

National Care Standards early education and childcare up to the age of 16
Standard 14: Well-managed service.

This area for improvement was made on 27 October 2017.

Action taken since then

All information held about children was reviewed with parents at least every six months in line with legislative requirements. Children's needs and preferences were known by staff. This meant they were informed enough with up to date information to meet their needs. For example, medication and health needs were planned for in detail in line with best practice.

This area for improvement has been met.

Previous area for improvement 2

The manager should review and update the service's whistleblowing policy to ensure it refers to the SSSC and their codes of practice.

National Care Standards early education and childcare up to the age of 16
Standard 14: Well-managed service.

This area for improvement was made on 27 October 2017.

Action taken since then
A review of the whistle-blowing policy took place to ensure it reflected best practice. The policy is now part of the induction pack for new staff with knowledge reviews taking place as required. Staff were confident in safeguarding children and knew when and how to whistle blow if needed.

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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