Whitehirst Park Private Nursery
Day Care of Children

West Doura Mains
Whitehirst Park
Kilwinning
KA13 6NQ

Telephone: 01294 551 171

Type of inspection:
Unannounced

Completed on:
7 June 2024

Service provided by:
James Carr

Service provider number:
SP2010978947

Service no:
CS2010269867

About the service

Whitehirst Park Private Nursery is located in Kilwinning, North Ayrshire and is registered to provide a care service to a maximum of 18 children at any one time of which;
- no more than 8 are aged under 3 years;
- no more than 10 are aged 3 years to 12 years.

At the time of our inspection, 33 children were registered with the service.

The accommodation consists of two main playrooms on the ground level and an outdoor play space. The service is close to local primary schools, shops and play parks.

About the inspection

This was an unannounced inspection which took place on 5-7 June 2024 between 09:40 and 17:00. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:
- spoke with children using the service
- received 14 completed questionnaires
- spoke with staff and management
- spoke with one visiting professional
- observed practice and daily life
- reviewed documents.

Key messages

- Children experienced warm, caring and nurturing approaches from the staff team.
- The staff team worked together to ensure positive outcomes for children.
- All children were happy and settled in the service.
- Parents and carers have access to the playrooms at handovers supporting partnerships between families and playroom staff.
- Children have regular outdoor experiences to promote their health and wellbeing.
- Management and staff should continue to develop self-evaluation in all areas of the setting.
- Management and staff should review the setting's policies/procedures and risk assessments to continue to provide a high standard 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 experienced care from staff who were kind, gentle, and caring. This approach helped children feel valued, loved, and respected and supported children's emotional development. Staff sat at the children's level and offered them cuddles and comfort, responding well to their care needs. As a result, children were happy, settled, and confident when approaching staff.

Personal planning for children contained relevant information and strategies and was used to support each child's care and wellbeing needs. These working documents were regularly updated to ensure their continued relevance and effectiveness. The introduction of family care plans and a monitoring and auditing system further enhanced the collaborative nature of this process. These plans were reviewed, signed, and dated in partnership with the children's parents and carers, who play a vital and valued role in this process.

Personal care routines were carried out with kindness and compassion, contributing to children's positive relationships with staff. Staff chatted with the younger children when changing their nappies, using this as an opportunity for quality one-to-one time. During the inspection, a door was installed in the nappy changing area, ensuring the children's privacy and dignity were protected. This measure also shielded the children in the playroom from intrusive smells, further enhancing their comfort.

Children enjoyed a hot meal or a packed lunch from home that was mainly nutritious, meeting their daily dietary requirements. The hot meals were carefully planned to ensure children received the necessary nutrients for their growth and development. Children had opportunities to be independent through self-serve, setting the table for themselves and their peers and counting how many plates and cutlery were needed, supporting early numeracy. Staff sat beside children, which kept them safe, and some staff ate lunch; this provided a role model and, most importantly, encouraged positive eating habits.

Staff demonstrated a commitment to children's emotional security and wellbeing and implemented sensitive arrangements for sleep routines. Routines were reflective of individual children's needs. For example, children cuddled with staff when tired or slept on the mats with a blanket/comforter in the cosy area. The positive attachments were formed to support children in feeling loved and promote good habits around sleep.

To further support safer sleep routines in the setting, we signposted the service to the following guidance: https://www.lullabytrust.org.uk/professionals/ and //hub.careinspectorate.com/media/5467/safer-sleep-babies-guide-professionals.pdf

Medication paperwork held in the setting should support the safe management of medication. However, there was no evidence of children receiving medication in the setting at the time of the inspection. The locked medication cabinet was out of the reach of children. Staff should continue to ensure the medication cabinet is used solely for intended purposes.

Quality indicator 1.3: Play and Learning.

The staff created a learning environment that benefited children's play and learning and actively promoted their emotional wellbeing. Most staff used age-appropriate words, conversations, and interactions to support children's language development. Staff training in effective questioning techniques should be considered to strengthen interactions further.

The play and learning areas have been thoughtfully designed to empower children to take the lead in their learning journey, fostering the development and expansion of their literacy and numeracy skills. Through active engagement with songs and storybooks, children were learning new vocabulary and were encouraged to explore patterns and numbers through adult-led and child-initiated experiences.

The learning environment allowed children to use open-ended materials to foster their curiosity, enquiry, and creativity skills. For instance, children created potions with flowers and water and were given real-life tools to cut vegetables and hammer pins into foam tubes. These diverse play opportunities helped children use transferable skills and meaningful connections in their learning.

Floorbooks and personal learning plans were used to capture and record children's participation in activities and experiences. These records, shared with parents and carers, contained valuable observations by staff. The use of trackers to measure children's progress in health and wellbeing, literacy, and numeracy has been a key support in achieving positive outcomes. Parents and carers agreed, with one commenting, "My child's key worker keeps me updated with my child's learning, and I'm fully aware of their next steps and learning needs."

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.

Children and families benefitted from a welcoming and comfortable setting. Children had access to their own space to store their personal items, fostering a sense of ownership and belonging, an essential element for their security and comfort.

The staff's commitment to self-evaluation, guided by the Health and Social Care Standards and Realising the Ambition document, supported them in providing the best care. This process ensured positive outcomes and created a calm environment for children to play and learn with natural materials and furnishings. The playrooms' layout further enhanced the environment, allowing children to have fun, explore, and investigate.

The positive learning environment empowered children to lead their play and learning. They were given the freedom to choose from various toys and resources that ignited their imagination and curiosity. This approach, included water and sand play, creative experiences, and the pretend shop and kitchen that fostered active engagement and happiness during play.

Children were encouraged to assess and manage their own risks outdoors using a daily pictorial checklist. This proactive approach, underpinned by adult supervision, allowed them to engage in experiences and take appropriate risks, fostering their independence and resilience.

The service's commitment to safety was evident in the measures and should instil a sense of security in the children and their families. These measures include a secure entry system, playroom registers, boundary fencing, and gates. While there were areas for improvement, such as hygiene, clutter, and fire evacuation exits, the swift action taken during the inspection to enhance these areas demonstrated the service's dedication to maintaining the safety of the children.

We discussed where regular infection prevention and control monitoring and fire safety practices that comply with health and safety regulations would further support a consistent approach to children's safety. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

The staff understood the importance of outdoor play to children's health, wellbeing, and development. This was evident in the opportunities provided for children to play outdoors during the inspection visits. We strongly encourage the staff to continue this practice, keeping the doors open to the enclosed garden to allow children to choose where to play, further enriching their learning experiences.

Accident and incident forms were completed and shared with parents and carers, and appropriate first aid was administered when needed. Regular audits of accidents and incidents would further help staff identify common or reoccurring themes and the appropriate action required to maintain children's safety. (See area for improvement 1 in Key Question 3: 'How good is our leadership?')

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.

The manager demonstrated a commitment to developing the service to promote outcomes for children and families. Where we made suggestions for improvements as part of this inspection, where possible, immediate action was taken.

The manager's warm and approachable manner created a supportive environment highly valued by the staff. This nurturing atmosphere made the staff feel personally and professionally supported and emphasised their integral role in maintaining high team morale, a key factor in the service's quality.

The setting had shared values, relevant policies and risk assessments. However, to further support the quality of the setting and the continued safety of the children. These should be reviewed as a staff team to increase effectiveness and provide the best outcomes for children.

Self-evaluation and reflection were mainly informal in developing an improvement plan, which was shared with families using the service. There was some evidence of children's input using a pictorial/floor book to include them in the plan's progress throughout the year.

Parents and carers agreed that they and their children were involved meaningfully to help develop the service, with one commenting, "Any suggestions or feedback we have given has always been considered/responded to and/or implemented. Whitehirst Park have always advised on any areas in which they are developing within the nursery, for example when developing their outdoor space further they asked if parents had any utensils or pots and pans in which could be recycled/donated for use within the nursery

outdoor space."

During our discussion with the manager, we emphasised the significant benefits of formal self-evaluation and reflection. When used more specifically, these processes can provide a robust and systematic framework to support continuous improvement. Staff could familiarise themselves with the quality framework for daycare of children, childminding, and school-aged childcare. This self-evaluation tool linked to the Health and Social Care Standards should further reinforce the service's commitment to quality, instilling a sense of confidence in the staff about the effectiveness of these processes.

In previous years, there was evidence of monitoring processes used in the setting. We asked that the monitoring calendar be reinstated to ensure the manager revises the setting's monitoring and auditing processes to ensure sustainable positive experiences for children across the service. See area for improvement 1.

Areas for improvement

1. To support children's health and safety, the provider should ensure that quality assurance approaches are developed further in line with relevant best practice guidance. This should include but is not limited to monitoring and auditing, infection, prevention and control, fire safety procedures and accident/incidents.

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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems' (HSCS 4.19) and 'I experience high-quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

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.

Staff demonstrated genuine kindness and interest to the children in their care. This resulted in confident and happy children. Parents and carers agreed that they have a strong connection with the staff caring for their child, with one commenting, "All staff at Whitehirst Park Nursery go above and beyond to communicate with ourselves regarding our child each day that they attend nursery. All staff are friendly, professional and approachable."

Staff knew the importance of building positive relationships and connections with families. As part of family engagement, the stay-and-play sessions led by the staff team contributed to strengthening partnerships working with families. These sessions allowed staff, children, and families to build strong bonds through play and learning in a fun way that enhanced family experiences. Staff communicated with parents and carers at drop-off and collection times to provide verbal feedback on their child's day. They should continue to develop approaches to support parent and carers with a high level of involvement in their childcare setting when developing relationships and strong connections.

The manager recognised and valued the need to ensure the service was appropriately staffed with the right skills mix across each playroom. The ratio of staff to children met the requirements set by the conditions of the service's registration, and the manager was available to support staff when needed.

Staff were aware of how many children attended at any time during the day. They used a register to update when children arrived or departed from the nursery. The manager was visible in the playrooms, role modelling practice and ensuring staff were deployed effectively. Staff were flexible, worked well together, and used effective communication to support one another. This ensured that the individual needs of children were met.

Staff wellbeing was supported through regular discussions, appraisals, wellbeing check-ins and team meetings with the manager. This was an opportunity to reflect on their childcare practice and further support their personal and professional development.

The setting supported staff to develop their competency as practitioners. The development of championing roles, such as communication champions, was used to support play experiences and interactions for children. One parent told us their child's learning and speaking have come on so much since they started, and they always have fun.

Staff participated in professional learning opportunities through self-directed study. They should continue to reflect on the impact of training on their childcare practice to ensure the best possible outcomes for children and families.

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 provider should take the necessary steps to ensure that nappy changing facilities are updated to enable children to receive personal care in an environment to supports infection, prevention and control and protects children's privacy and dignity. Particular attention should be given to handwashing facilities and privacy and dignity.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected.' (HSCS 1.4), and 'If I require intimate personal care, there is a suitable area for this including a sink if needed' (HSCS 5.4).

This area for improvement was made on 30 August 2023.

Action taken since then

The provider took the necessary steps to ensure that nappy changing facilities were updated to enable children to receive personal care in an environment that supports infection prevention and control and

protects children's privacy and dignity. The provider should continue their plans for long-term nappy-changing facilities to further support current nappy-changing guidance.

This area for improvement has been met.

Previous area for improvement 2

An identified handwashing sink should be available within the 3 years and over playroom for children and staff.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'My environment is safe and secure' (HSCS 5.17)

This area for improvement was made on 30 August 2023.

Action taken since then

An additional sink was purchased for the 3 years and over playroom for children and staff, which should support handwashing.

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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