Helping Hands Nursery
Day Care of Children

Dundee and Angus College
Keptie Road
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Telephone: 01241432726

Type of inspection:
Unannounced

Completed on:
13 June 2023

Service provided by:
Dundee and Angus College Board of Management

Service provider number:
SP2013012085

Service no:
CS2013317812

About the service

Helping Hands Nursery provides a daycare of children service in Arbroath. The service is registered to provide a care service to a maximum of 52 children of whom no more than 10 children are aged two to under three years. The age range of the children will be from two years to those not yet attending primary school.

The service is based in a residential area of Arbroath and is close to local shops, parks and other amenities.

About the inspection

This was an unannounced inspection which took place on 12 June 2023 between 08:45 and 16:45. Feedback was shared with the service on 13 June 2023. 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 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:

- observed practice and daily life
- spoke with staff and management
- reviewed documents
- spoke with children using the service
- gathered the views of family members through conversation and MS Forms.

Key messages

• Children benefitted from warm, caring, nurturing staff who knew their needs well.

• Children were fully engaged in purposeful play experiences which related to their interests.

• A wide range of high-quality resources and loose parts promoted quality play experiences for children, both indoors and outdoors.

• Families were central to the ongoing improvements within the service and felt valued and listened to.

• Self-evaluation and improvement plans were in place to support the ongoing continuous development of the service.

• All staff were passionate and motivated to provide high quality experiences for children and the development of their own practice.

• Staff deployment supported continuity in children's care and ensured their effective supervision.

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?	5 - Very Good
How good is our setting?	5 - Very Good
How good is our leadership?	5 - Very 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? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 1.1 - Nurturing care and support

Children benefitted from secure, nurturing interactions with staff, who modelled respectful relationships. One parent commented, 'We feel very supported as a family at Helping Hands'. Staff promoted the language of the SHANARRI wellbeing indicators, which are safe, healthy, active, nurtured, achieving, respected, responsible and included, to encourage children to take care of their environment. For example, staff praised children's tidying responsibilities by recording their achievements on the 'responsible wall'. This developed a sense of pride and ownership and gave children the message that they mattered.

Personal plans were in place for each child and the service had developed strategies, which ensured they were updated every six months, with children and families, in line with legislation. We suggested further improvements to these, as there were inconsistencies in the information recorded during updates. We suggested any changes or new information should be recorded on the child's plan. Families and key workers should sign personal plans, to ensure they are agreed in partnership. This would ensure that the service held the most up to date information to meet children's needs.

Passports had been introduced where children's needs required a consistent approach. These detailed the strategies for learning, any potential triggers and the supports in place to meet their needs. Staff spoke knowledgeably about these strategies. This meant that children's care and wellbeing needs were met and promoted positive outcomes.

Children's medication was stored appropriately and the service had developed systems to ensure that medication was reviewed every three months. To ensure children receive the right care, where medication is required, staff should accurately record the signs and symptoms. The manager had acted upon these suggestions before we gave feedback. This meant that children's health needs were met.

The mealtime experience had been a recent development for the service. Snack was offered inside and outside, as staff recognised that more children would access snack when outside. One child commented, 'I cut up the apples and strawberries. You can have five apples and four strawberries'. Children developed their life skills across mealtimes, as they used tongs to select their foods and spread their toast using a knife. Staff were responsive to children's needs, as they recognised the value of introducing a second sitting at the early lunch time, to ensure children remained engaged and happy. As a result, mealtimes offered a calm and nurturing experience.

Quality Indicator 1.3 - Play and learning

Children were empowered to be fully involved in their play and learning. Staff skilfully extended children's play through their use of effective questioning and ponderings. Staff engaged children's critical minds and curiosities, as they discussed the weight ants can carry. Children enthusiastically engaged in the conversation and staff suggested they find out more about their interest. This demonstrated that staff interactions in play enhanced children's experiences.

Literacy and numeracy learning was naturally promoted across interactions and planned experiences. A tuff tray was set up to invite children to explore and learn about symmetry. Staff were aware of children's stage of development and used this knowledge to support their emerging vocabulary skills. Staff were observed changing their interactions and use of language to meet the needs of children. As a result, children's learning in literacy and numeracy was progressed at the right stage.

Responsive planning had been introduced and staff had participated in training through the local authority. Provocations and invitations to play were used to motivate children and staff were flexible within these, following children's lead in play. One parent commented, 'Helping hands is a very welcoming setting for my child and they provide lots of really good learning opportunities for each individual'. Children had the freedom to explore their own boundaries and risks in play. Staff encouraged children to assess their play for risks and spoke about the need for space, as they used the tent supports as cranes. This meant that children were respected to manage their own risks.

Children had the opportunity to go for walks, visit local parks and shops and the service had used the college minibus to support children's transition to primary school. This developed children's sense of belonging within the community.

Staff all spoke knowledgeably of children's stages of development and the strategies within passports to support these. Staff were observed using Makaton as they communicated to one child that the water was available outside for a drink. The reflective nature of staff meant that they were continually thinking about their role in promoting high quality play experiences. Staff spoke about their role in supporting play and the benefits of standing back to observe this. As a result, children's needs were met.

Staff recorded children's observations using digital learning journals. We suggested that this was an area for further development. Observations should be personal to the child whether they are group or individual posts. This would support staff to be specific in what the child has learned and any potential next steps.

How good is our setting? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 2.2 - Children experience high quality facilities

Children had access to a play space that was warm, had natural light and ventilation. Soft lighting was used to create a calming ethos. The environment was clean, comfortable and well maintained. Wall displays contributed to a stimulating environment that celebrated children's creativity and achievements. The service had a free flow to outdoors and kept all play areas open for children throughout the day. This meant children had regular access to fresh air and exercise.

The play space, both indoors and out was purposefully planned with open-ended materials and creative approaches, that successfully engaged children's imaginations. One parent commented, 'The setting is well resourced and homely. The outdoor space is large and the resources changed often'. We observed children using these resources to extend and develop their play in line with their interests. Books were effectively displayed around the service and linked to children's experiences. Questions and challenges were posed at various activities to motivate children to explore and learn. The manager shared recent audits of the environment where they reflected on children's engagement and experiences. The high-quality environment meant that children experienced enriched play and learning.

A buzzer entry system to the service meant that staff were aware of who was entering the building. Staff updated the numbers of children in the building throughout the session to ensure they were accurately recorded. Risk assessments were in place and these detailed the potential hazards and actions taken to reduce these. A daily risk assessment was completed by staff, which further ensured a safe space to play. A robust approach to the recording of accidents and incidents had recently been updated. This meant that staff were able to reflect on the environment to maintain children's safety.

Effective infection prevention and control measures were in place, which ensured the risk of any spread of infection was reduced. Children and staff were observed washing their hands at appropriate intervals throughout the day and food serving areas were cleaned.

How good is our leadership? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 3.1 - Quality assurance and improvement are led well

The service aims and objectives were displayed in the cloakroom which ensured they were visible for families. The manager shared that these were given to families in their welcome book, prior to joining the service.

Involving families in the life of the service had been a recent focus area for development. Questionnaires had been shared and the manager had recently developed the partnership with families' policy to reflect their work. Families spoke positively about the communication they received from staff both verbally and electronically. They were very enthusiastic in their desire to communicate the improvements and their love of the service and staff. One parent commented, 'My knowledge of gardening was shared and encouraged, with small ideas being implemented quickly. I felt very included and my child enjoyed having me in a different part of the setting helping'. This demonstrated that families felt valued and listened to.

The staff team were committed to the continued improvement of the service and all spoke passionately about their journey and progress so far. A quality assurance calendar was in place and this was broken down into monthly tasks, alongside an improvement plan. Regular staff meetings and monitoring evaluated the progress made and identified any next steps. We suggested methods to streamline this information, to ensure that all staff can access and reflect on where the service are and the continued improvements. This would mean that the approach to improvement is inclusive and recognises the impact of any actions.

The manager had introduced formal one to one review meetings with staff to discuss their strengths and areas for improvement. This meant that staff had the opportunity to reflect on and develop their practice.

Policies and procedures were in place and these were regularly reviewed and shared with staff to ensure a consistent approach. Policies reflected best practice and the service were in the process of reviewing these, to ensure they remained up to date. This meant that families had the right information about expected practice and procedures.

How good is our staff team? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore we evaluated this key question as very good.

Quality Indicator 4.3 - Staff deployment

Children benefitted from a staff team who had a range of skills, knowledge and experience. Staff were courteous and respectful to one another which created a relaxed and happy environment for children. They placed children at the heart of their work. They displayed warmth and kindness which enabled children to feel valued, loved and secure. One parent commented, 'Amazing staff with big hearts'. Staff were observed to be in tune with children's needs and preferences and offered personalised support. Staff were highly engaged with children and were mindful of when to give children space to play and explore. They were committed and passionate about their work with children and the support they provided. This meant that children experienced high quality care.

Staff communicated and worked well together, to ensure children were safe and engaged in quality experiences, throughout the session. They were flexible and deployed effectively, which meant that children were always well supervised. One parent commented, 'The staff team work incredibly well together and have fantastic communication. They are able to share with parents as they clearly talk amongst themselves and support each other'.

There was a positive ethos within the service and staff enjoyed working together. Staff spoke positively about the improvements made within the service and felt they worked well together as a team. Children were clearly the focus within staff interactions, as they used their knowledge of children and their stage of development, to facilitate their interactions to extend play and learning. This demonstrated that children were supported by a highly motivated staff team.

An induction process was in place and staff completed a checklist to ensure they understood the required information and procedures. Staff participated in a three and six-month review to discuss their practice, strengths and development needs. We suggested that the service review the National Induction toolkit and consider introducing more regular reviews. This would ensure staff were well supported and had any potential needs met in a timely manner.

Staff had participated in a range of training and spoke enthusiastically about their learning and the impact on their practice. Staff had lead roles in sharing their learning at team meetings, which helped to move practice forward and provided quality experiences for children. Staff evaluated their training using the SSSC (Scottish Social Services Council) recording platform. This meant that training was meaningful and embedded within practice.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 30 April 2023, the provider must ensure that the deployment of staff is effective in providing high-quality outcomes for children. The provider must ensure staff work together flexibly to provide adequate supervision and quality engagement with children across the day.

To do this, the provider must, at a minimum, ensure:

a) staff have clear roles and responsibilities that promote positive outcomes for children

b) staff deploy themselves to supervise children and keep them safe

c) staff manage their time to spend quality time with children.

This is to comply with Regulation 15(a) (Staffing) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This requirement was made on 3 February 2023.

Action taken on previous requirement

A new member of staff had been appointed. Meetings had been held to discuss staff roles and responsibilities and staff confidently shared these. Staff communicated well with each other as they moved around the space and children's safety was maintained. Staff were focused on providing high quality experiences for children and children were fully engaged in these. This requirement has been met.

Met - within timescales

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 improve the wellbeing and nurture of children, the provider should ensure that all children's needs are effectively planned for, met and responded to by staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I know who provides my care and support on a day to day basis and what they are expected to do. If possible, I can have a say on who provides my care and support' (HSCS 3.11) and 'People have time to support and care for me and to speak with me' (HSCS 3.16).

This area for improvement was made on 3 February 2023.

Action taken since then

Passports had been introduced to ensure a consistent approach to meeting the needs of children. Staff spoke knowledgeably about these strategies and implemented them effectively with children. This area for improvement has been met.

Previous area for improvement 2

To fully involve children in their play and learning, the provider should improve play experiences, which develop a broad range of lifelong learning skills. The provider should ensure play is fun, exciting and challenging.

This should include, but is not limited to:

• offering an appropriate balance of planned and spontaneous play experiences

• building connections to the local community

• developing child-centred, responsive planning approaches that respect children's interests and life experiences.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states that:

'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

This area for improvement was made on 3 February 2023.

Action taken since then

Children were fully engaged in a wide range of experiences. Staff were focused on improving outcomes for children and were active participants within play. The service had started to access the community more regularly with trips to parks and using the college minibus to support the transition to school. Responsive planning training had been participated in and staff spoke with confidence about their role in supporting play and learning through a balance of planned and spontaneous experiences. This area for improvement has been met.

Previous area for improvement 3

To improve children's play and learning experiences, the provider should review their use of the available spaces within the provision to ensure these are effective in engaging children in high-quality play opportunities.

This would include, but is not limited to;

- providing experiences which are challenging, stage appropriate and interesting
- developing spaces for children to engage in play with adults
- recognising when alternative spaces can ease pressure on the larger environment.

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

'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS 5.20).

This area for improvement was made on 3 February 2023.

Action taken since then

Staff made effective use of all of the available spaces and were aware of when to redirect children supporting them to remain focused and engaged. The lunch time routine and morning routine had been changed to provide a smoother transition for children and to support individual needs. This area for improvement has been met.

Previous area for improvement 4

To ensure high quality care and experiences for children, quality assurance and self-evaluation should be embedded into practice.

This should include but not be limited to:

- children and families are meaningfully consulted, involved and influence changes within the setting
- quality assurance, including self-evaluation and improvement plans, lead to high quality care and support.

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 systems' (HSCS 4.19).

This area for improvement was made on 3 February 2023.

Action taken since then

The manager and staff team have developed quality assurance processes and have introduced methods to support self-evaluation, including regular monitoring of the environment and practice. Newsletters are regularly shared with families to keep them up to date with changes and they are frequently consulted and involved in changes within the service. Mind maps and floor books have been introduced to consult with children to ensure their experiences are meaningful. This area for improvement has been met.

Previous area for improvement 5

To ensure children experience consistently positive outcomes, the provider should support staff to access training and learning experiences, taking account of any gaps in their skills, knowledge and practice.

This should include but not be limited to training and learning relating to;

- children's play and learning
- children's wellbeing
- supporting children to resolve conflicts
- effective use of environments.

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

'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 3 February 2023.

Action taken since then

Staff spoke positively about the range of training that they had participated in and the impact it had on their practice. Further training needs had been identified by staff to take forward next session. 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?	5 - Very Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	5 - Very Good

How good is our setting?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very Good

How good is our leadership?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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