'School's Out' - Barsail Day Care of Children

Barsail Primary School
Park Moor
Erskine
PA8 7HL

Telephone: 07876 701 467

Type of inspection:
Unannounced

Completed on:
26 June 2023

Service provided by:
School's Out Centres Limited

Service provider number:
SP2014012362

Service no:
CS2014331378

About the service

'School's Out' - Barsail is a daycare of children's service based in Erskine, Renfrewshire. The service are based within Barsail Primary and they have access to two adjoining rooms within the school. They also have access to the school playground and grass area. The service provide breakfast club, after school care and holiday club to a maximum of 40 school aged children. Children registered to attend Primary school in the August term can be cared for by the service in the summer holiday period preceding the August school term. The service is near local amenities, such as, schools and parks.

About the inspection

This was an unannounced inspection which took place on 20 June 2023 between 15:00 and 18:15. 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:

- We spoke with two staff
- We gained feedback from three staff through questionnaires
- We gained feedback from 11 families through questionnaire
- Observed practice and daily life
- Reviewed documents

Key messages

- Children experience warm, caring nurturing approaches.
- Children are happy, confident and having fun as they engaged in experiences.
- Children are offered choice in their play and given opportunities to evaluate learning.
- The children have access to their own and wider communities.
- The service should review Personal Planning guidance to ensure best practice.
- The service would benefit from using supporting documentation through self evaluation and quality improvement.

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.

1.1 Nurturing, care and support

Children experienced warm, caring nurturing approaches and had built up positive relationships with staff. This enabled children to feel safe, secure and confident. One parent commented: "Friendly staff. My child is safe, secure and happy".

Staff were supportive and respectful in their interactions with children. They took time to listen to children and supported them to express their ideas and opinions. This enabled children to feel valued and respected. For example, one child had earned a certificate from school. Staff spoke to the child offering praise and recognition stating they should be very proud of themselves. One parent commented: "Always very welcoming and genuinely interested in our child."

Children enjoyed eating together in an unhurried, relaxed atmosphere which promoted choice and independence. We asked that the service continue to consult with children so they are involved in evaluating and improving experiences with food.

Staff took time to get to know children and families before they started at the service and shared appropriate information with parents. The service offered open evenings where families could visit prior to starting with the service. This supported positive transitions. One parent commented: "My child has just started I am really happy with the service provided. The manager provided me with good information about the service and was very thorough getting all the required information from me about my child."

Personal Plans were in place, however they were not regularly reviewed and did not include up to date information. The service should review Care Inspectorate Personal Planning guidance and ensure the relevant up to date information is recorded within children's plans. The service should ensure these are reviewed at least every six months and shared with parents. This would reflect the holistic needs of each child to help improve their wellbeing and support positive outcomes. **(See Area for Improvement 1)**.

Children were kept safe as appropriate administration of medication procedures were in place and medication was delivered in a safe and sensitive manner.

1.3 Play and Learning

Children were happy, confident and having fun as they engaged in experiences and learning and development opportunities. One parent commented: "My child is safe, secure and happy".

Staff evaluated weekly experiences which were linked to children's wellbeing in relation to children being safe, healthy, active, achieving, nurtured, respected and responsible. Children were given opportunities to evaluate their experiences and provide feedback. This enabled children to influence future experiences related to their choices and interests.

Children were provided with opportunities to be meaningfully involved in leading their play and learning. They were able to develop their skills through a balance of spontaneous and planned experiences and opportunities. There were lots of discussions between staff and children about what they wanted to do that day. Staff planned activities each day but children could choose whether to engage or not. This promoted children's choice and independence.

Systems reflected children's learning and evaluations of experiences. However, some did not show where these experiences were initiated from. We discussed with the service how they could log this to evidence progression in children's learning.

Children's opportunities for play and learning were enhanced through connections to their own and wider communities. They took part in litter picking with Renfrewshire 'Team Up to Clean Up' initiative. This enabled children to develop skills for lifelong learning.

Areas for improvement

1. To ensure children's individual wellbeing benefits from the effective use of personal planning, the service should review how information is recorded, use supporting documentation to inform practice and include up to date relevant information. The service should review these with parents at least every six months or when required.

This is to ensure that care and support is consistent with the Health and Social Care Standards 1.15 which states that: My personal plan (sometimes referred to as my care plan) is right for me as it sets out how my needs will be met, as well as my wishes and choices.

How good is our setting? 4 - Good

2.2 Children experience high quality facilities

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

The environment was bright and well-ventilated with direct access to an outdoor area. We observed children having fun outdoors. One child commented "My favourite thing to do is football and playing outside, we can make lots of choices about all the things to do." This promoted children's wellbeing.

Spaces reflected children's current interests and curiosities, with appropriate resources and materials to support play and learning. One child discussed their interest in dinosaurs which they had access to and were able to explore within the setting. Children had access to quiet areas and opportunities to rest and relax as well as the exploration of loose parts to promote children's creativity and curiosity.

Infection prevention control procedures were followed and appropriate handwashing was implemented. Arrangements were in place for cleaning and maintenance within the service. This provided a clean and well organised place for children to play, learn and be cared for.

Risk assessments were in place and children were encouraged to identify and reduce risks within the setting by completing their own risk assessments. The children discussed using safety equipment while playing on scooters outdoors and one child commented about staying safe while doing gymnastics. "I like to play on the grass and do gymnastics but I can only do the splits here because we can't do anything dangerous."

The service should include more detail within the outdoor risk assessment. This will ensure children engage in experiences in a safe, secure way and minimise any risks. **(See Area for Improvement 1)**.

The service took part in regular fire drills where children were able to familiarise themselves with the procedures. This enabled staff to highlight areas for improvement as they recorded any issues arising from this to support children.

Children could influence where they played outdoors every day and regularly explored a natural play and learning environment. The children and staff had recently developed a local grass area and used this regularly as part of outdoor learning. We saw evidence of consultations with children where they had expressed an interest in den building. They had put together a box of resources to use while exploring this area incorporating children's interests. One parent commented: "My child loves the den building outside." As a result children had plentiful opportunities for physical play and access to fresh air, supporting their wellbeing.

Children accessed part of the school playground which was not enclosed. Registers of attendance were completed appropriately which reflected the total amount of children present. We discussed with the service the implementation of further measures to secure the boundaries within outdoor environments and to accurately know where each child is at any one time.

Areas for improvement

1. To ensure children are kept safe, the outdoor risk assessment should be reviewed to clearly identify potential risk to children when playing a physical contact sport on a concrete surface. Risk assessments should be updated following any significant incident.

This is to ensure care and support is consistent with Health and Social Care Standard 5.17: My environment is secure and safe.

How good is our leadership? 4 - Good

3.1 Quality Assurance and Improvements are well led

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Staff reflected well together and used these to bring about positive changes to outcomes for children. They engaged in purposeful discussions at regular meetings where they had opportunities to discuss important aspects of the service. For example, staff discussed how new children were settling and how to further support them. This ensured staff were kept up to date with ongoing communication and provided opportunities to engage in professional dialogue.

The service had created a plan to monitor various aspects of the service. This supported them in identifying areas for development. An improvement plan was in place with evidence of areas identified for improvement being actioned and taken forward within practice.

For example, they had identified a more effective way of recording and sharing children's learning and development in their personal plans and were moving to using these online. We discussed with the service the use of supporting documentation to highlight areas of good practice and areas for improvement within this process.

The manager implemented support and review meetings with staff to discuss areas for development or further training required. These discussions had enabled staff to take on leadership roles within the service with one staff member developing the grass area with children. We discussed with the service the implementation of a staff monitoring programme in relation to staff practice and engagement. This would highlight areas for staff to develop in aspects of their practice and provide the manager with structured feedback in relation to observations taken.

The manager completed monthly checklists relating to various policies and procedures. This ensured aspects of practice were monitored appropriately. Staff took part in training and could engage in courses which related to their role within the service. We discussed with the service the implementation of a system to enable staff to evaluate what impact their training has had on practice.

Leaders promoted and sustained a shared vision for the setting which reflected the aspirations of children. One parent commented: "Particularly strong leadership very knowledgeable and understanding of the children's needs." Children took part in meetings where they discussed how they would like to develop certain areas within the setting. However parents' ideas and opinions were not incorporated. The service should consider ways to include the ideas and opinions of parents in relation to the evaluation of the service. (See Area for Improvement 1).

Areas for improvement

1. To enable parents to be meaningfully involved and influence change within the setting, the service should implement a system to engage parents and enable them to be part of evaluating aspects of the service, including the review of policies and procedures.

This is to ensure care and support is consistent with Health and Social Care Standard (4.19) I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

How good is our staff team? 4 - Good

4.3 Staff Deployment

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Staff were deployed appropriately throughout the setting. A staff rota was in place to support this and enabled staff to be aware of their roles and responsibilities. Staff were clear about the areas they were covering within the service which resulted in effective supervision of children and young people to keep them safe.

Staff communicated appropriately with their colleagues when tasks took them away from their responsibilities. Staff were flexible when activities required changes to their routines and rotas and supported each other within the learning environment.

This supported children to choose where they wanted to play, avoiding unnecessary disruptions. There was a positive ethos of attendance within the service and staff were supportive of each other. Staff had built up good, positive relationships with each other and this enabled them to work effectively as part of a team providing positive outcomes for children. One parent commented: "They genuinely care for the children and are passionate in what they do. It's a very positive environment."

Busier times of the day, such as arrival and departure times, were recognised and planned for. This ensured children were safe and accounted for on arrival at the service.

Arrangements for absences, whether planned or unplanned, were managed to support minimum disruption to children's routines. Staff less familiar with the routines were supported within their roles and responsibilities.

There was a mix of skills among the staff team and management were supporting staff in developing their confidence in these. Staff told us they had good communication, got on well together, and worked well as part of a team.

There was a positive ethos of attendance within the service and staff were supportive of each other. Staff had built up good, positive relationships with each other and this enabled them to work effectively as part of a team providing positive outcomes for children. One parent commented: "This is a great service with a high standard of care given to the kids. I trust that my child is well looked after by the team at Barsail."

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 health and wellbeing, the provider should ensure children's personal plans contain relevant and up-to-date information and that staff are aware of and use to meet children's needs, wishes, and choices.

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).

This area for improvement was made on 12 May 2022.

Action taken since then

Some progress had been made since the last inspection, for example, next steps box had been added and good levels of children's involvement were evident and related to the wellbeing indicators, safe, healthy, achieving, nurtured, responsible, active and respected.

However, management and staff would benefit from familiarising themselves with the Care Inspectorate Personal Planning guidance and developing their understanding of the purpose of personal planning, how to record and review these effectively with parental involvement. Parents are currently not part of reviewing their children's Personal Plans and there was not enough information regarding meeting children's health needs.

The service had implemented a 'post it' system where they recorded information on 'post it's' however although this information was meaningful it was not transferred onto a personal plan for children with up to date information. Therefore this area for improvement has not been met and it has been made as a further area for improvement at this inspection.

The service have made plans to move to an electronic version of recording children's learning from August 23 which will be reviewed and shared with parents as appropriate and at a minimum every six months.

Previous area for improvement 2

To promote the continued development and improvement of the service, the provider should involve the manager and staff in implementing routine and robust quality assurance systems, which will support the developing of an effective Improvement Plan.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 12 May 2022.

Action taken since then

The service have implemented a system to highlight where they are at in relation to aspects within the service. The areas highlighted have supported them in implementing an Improvement Plan which showed areas being identified and actioned with appropriate timescales. We discussed with the service they should continue to build on this and reflect on all aspects of the service relating this to supporting documentation. This would enable them to highlight where they are at and highlight any areas for improvement in line with supporting documentation.

In relation to the action taken this area for improvement has been met.

Previous area for improvement 3

Outdoor risk assessments should be reviewed to clearly identify potential risk to children when playing a physical contact sport on a concrete surface. Risk assessments should be updated following any significant incident.

This is to ensure care and support is consistent with Health and Social Care Standard 4.23: I use a service and organisation that are well led and managed.

This area for improvement was made on 17 July 2023.

Action taken since then
Risk Assessments did not identify potential risks to children playing a physical contact sport on a concrete surface.

Therefore this has been made as a further area for improvement at this inspection.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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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Compass House
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Dundee
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