Grasshoppers Children's Nursery
Day Care of Children

30 Witchknowe Road
Kilmarnock
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Telephone: 01563 571 598

Type of inspection:
Unannounced

Completed on:
30 October 2024

Service provided by:
Z A Care Limited

Service provider number:
SP2014012286

Service no:
CS2015336500

About the service

Grasshoppers Children's Nursery is provided by Z A Care Limited. The service is registered to provide a day care of children's service to 96 children under primary school age. The service is located in a residential area of Kilmarnock, East Ayrshire. The accommodation has three large playrooms, a kitchen, children's toilets and nappy changing facilities and three separate, secure outdoor play spaces. At the time of our inspection, 144 children were registered with the service.

About the inspection

This was an unannounced inspection which took place on 29 and 30 October 2024. The inspection was carried out by three 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:

- spoke with people using the service and members of their family;
- issued an electronic survey to families using the service and received 49 responses;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

Key messages

• Children were happy, settled and confident in the setting.

• Children experienced warm and caring interactions which supported their overall wellbeing.

• Staff knew the children's needs and preferences well.

• Children could access outdoor spaces directly from their playroom.

• Quality assurance processes were developed to support continuous improvement of the service.

• The environment and play experiences should continue to be developed to capture children's interests and curiosities, supporting them to engage meaningfully in their play and learning.

• Medication processes should be improved to ensure children's health and medical needs can be met safely.

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

Staff were warm, kind and caring in their interactions with children. They demonstrated well-rounded knowledge of children's personalities, stages of development and family backgrounds, and offered personalised care in response to individual needs. As a result, children were happy and relaxed.

The team valued building positive relationships and connections with families. Stay and play sessions, parents' evenings and buggy buddies strengthened partnership working. Staff communicated with parents at drop off and collection times and the use of an electronic platform ensured families were well informed. Management and staff should now routinely encourage parents to enter the main playrooms as this will support them to become more familiar with their child's play and learning environments.

Children experienced calm and relaxing mealtimes where their independence was supported. Meals were healthy and nutritious and catered for children's allergies, cultural needs, and preferences. We made some suggestions on how children's choice of what lunch serving to attend could be further supported to ensure less disruption to children's play. We have also asked that drinking water is more accessible for younger children to ensure they remain hydrated.

Personal plans were in place for all children attending the service and were regularly reviewed with parents. Most parents told us they were involved in developing children's personal plans, commenting; "I am involved in setting and signing off what the focus for my child's development is." Management should further monitor the quality of children's personal plans to ensure it is clear what support all children require to meet their needs.

Where children required support from external agencies, partnership working ensured their needs were well considered. We discussed with the management team the benefit of all children having a chronology of significant events in place which could be accessible to keyworkers. This would ensure staff supporting children have a clear understanding of significant events in each child's life, ensuring children to receive the right support at the right time.

There were some inconsistencies in the written records that supported safe administration of medication. The management team should ensure parental permissions are always fully completed and where medication is due to expire, new medication is requested and received at the service before the date of expiry. This will ensure children's health needs are met safely (area for improvement 1).

Quality indicator 1.3: Play and learning

Children's wellbeing was supported by daily access to outdoors. The secure gardens provided space for children to develop their physical skills. As a result, children were having fun whilst growing in confidence.

Children were visibly happy, confident, and actively accessing play resources that were available to them.

They had opportunities to listen to stories, sing songs, build objects and independently explore imaginative play areas. As a result, children mostly engaged well with each other and played cooperatively.

There was scope for staff to further support children's interests, ideas and curiosities within the learning environments. For example, some play zones lacked sufficient resources that were stimulating, and some adult initiated activities were removed after short periods of time which did not allow children to revisit, problem solve and consolidate their learning throughout the day. We shared our observations with staff and improvements were made by the second day of our inspection. Continuing to further develop play and learning environments in line with children's interests will help secure breadth and depth of learning and ensure children learn through their natural curiosity, creativity and inquiry.

Approaches to planning for play and learning had recently been reviewed. New processes were introduced with an aim of developing systems that are child-centred and track children's developmental progress over time. Staff confidence and skills varied with planning processes and some staff were making good progress with developing floor books to record children's enjoyment and learning. The management team should continue to support staff to embed the planning, observation and assessment cycles. This will build confidence in the team and ensure staff support children to learn at a pace that is right for them.

Staff would further benefit from increasing their understanding of children's schemas. Schemas are patterns of behaviours children show through play. Staff skills in supporting and extending children's learning through conversation also varied and more effective use of adult questioning would provide opportunities to widen children's thinking, help them explore new ideas and consolidate their learning. Further support or training for staff in these areas would ensure children were fully supported to reach their potential.

Areas for improvement

1. To ensure children's health and medical needs can be met safely, the management team should ensure medication permissions are consistently completed accurately and reflect children's current medical needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

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

Playroom registers, outdoor boundary fencing, and a secure entry system contributed to a safe environment for children. Daily visual checks were carried out and risk assessments identified potential hazards and the necessary control measures. These processes supported children's safety.

Playrooms were well ventilated and the recent addition of low-level windows and doors ensured children could view their outdoor environments. Each playroom had direct access to a secure outdoor space, where improvements had been made. Improvements included the addition of large climbing apparatus to support physical development. We discussed with staff some missed opportunities to enhance nature and sensory

experiences outdoors. Staff agreed they were continuing to develop the outdoor spaces and would make further improvements informed by children's interests and wishes.

Children had some access to their local community, including visits to local woodlands and an elderly care home. Community initiatives could be more routinely planned for to secure children's sense of inclusion.

We observed that some areas within the setting had deteriorated with age and were not inviting for children. For example some furniture pieces were porous or damaged and there was an unpleasant odour in the main entrance. Management told us this was due to the floor covering needing replaced. Prior to our inspection, the provider had recognised improvements were necessary and planned to undertake some refurbishment works in December 2024. Planned improvements include; replacing playroom kitchenettes, painting walls, replacing all floor coverings and some large furniture items. We have requested that the management team submit a planned refurbishment notification to Care Inspectorate outlining the proposed works and time scales for improvements.

As part of planned refurbishment works, we encouraged staff and management to consider ways that the learning environments could be further developed to support children's curiosity, creativity and overall wellbeing. Children could experience more deep and meaningful play by further increasing access to natural open-ended play materials and by adding homely touches such as soft furnishings and cushions to create more cosy spaces across the service. This will ensure children imaginative play is enhanced and they are supported at the appropriate level for their stage of development.

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

Management and staffs' positive interactions and relationships with children and their families helped the service to have a positive ethos. The vision of providing a safe, secure environment to nurture children was achieved through valuing play. This told children that they mattered.

Management and staff engaged well with the inspection process and demonstrated a positive attitude towards change and improvement. Where we made suggestions for improvements, staff applied these promptly. For example, on day two of our inspection, positive changes had been made within the 3-5 playroom to offer children more choice in their play. This demonstrated capacity and willingness within the team to make informed improvements.

Formalised self-evaluation processes had been developed which gathered the views of staff and parents. Ongoing consultation included team meeting reflections and parent questionnaires. Where improvements had been suggested, these were actioned promptly and changes shared using a digital platform. This meant the views and aspirations of people using the service was influencing provision and gave parents and staff the message that their opinions mattered. The management team should now consider ways to further involve children within these processes.

An improvement plan had been developed which outlined two priorities for the 2024/25 academic year. The management team should now further utilise the information gathered through self-evaluation and quality assurance processes to inform future improvement plans. Further consideration should be given to how the

service plan to measure the impact of any improvements made. This would ensure any changes within the service positively impact staff, children and families.

Accidents and incidents were well recorded and shared with parents using a digital platform. We asked the management team to extend their audit process to further consider patterns and identify the actions needed to prevent reoccurrence. This further supports children's safety.

Through reviewing documentation and discussions with management and staff, we identified that Care Inspectorate had not been correctly informed of the company directors. Directors are the appointed people with responsibilities for managing the company day to day. We have asked that the provider updates the relevant individual information as a priority to ensure accurate records are maintained. At the time of publication of this report, this information had not been updated.

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 were enthusiastic about the service and their roles. They were respectful of each other, children and their families. Children confidently approached staff for support, and staff responded using warm tones, affectionate gestures and interacted with children at their level showing respect. This created a positive ethos that allowed children to feel safe and secure.

Staff were safely recruited and were well supported by induction process and the allocated of a mentor for ongoing guidance and support. All staff were registered or in the process of registering with the regulatory body, Scottish Social Services Council (SSSC). We discussed the importance of staffs' registration category reflecting the role they are recruited to and asked that both members of management are registered with SSSC within the manager category. This will ensure their responsibilities are clear.

Appropriate numbers of staff were in place across the day to ensure children's safety. We discussed with the management team how staff deployment over lunch time could be improved within the 3-5 playroom. For example, as the result of staff breaks and the toilet facilities not being located within the playroom, all children were escorted to the toilet when only one child requested to go. This did not support children's freely chosen play or their privacy. We also discussed with management the benefits of children being supported to access toilets independently as requesting support could be a barrier for some children. This would support children's independence, privacy and dignity. The management team agreed to consider this.

Staff benefited from regular opportunities to meet as a whole staff team. This supported good communication and ensured that all staff felt valued. There was a mixture of staff experience, knowledge and skills in the team. Staff were keen to support each other's professional development and spoke positively of their colleagues' strengths. This helped staff to work collaboratively to promote positive outcomes for children and families.

Most staff members had not received child protection training or an annual update for some time. This had resulted in some staff not having confidence to identify what steps they would take should a concern arise. We asked that all staff receive child protection training as a priority to ensure the team are skilled to take

the appropriate steps to safeguard children. The management team provided confirmation that all staff had received appropriate training prior to the completion of this inspection report.

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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