Gorebridge Out of School Care
Day Care of Children

Gorebridge Primary School
2C Barleyknowe Lane
Gorebridge
EH23 4XA

Telephone: 07849701048

Type of inspection:
Unannounced

Completed on:
15 August 2023

Service provided by:
Gorebridge Out of School Care a Scottish Charitable Incorporated Organisation

Service provider number:
SP2015012614

Service no:
CS2015342504

About the service

Gorebridge Out of School Care is situated within Gorebridge Primary School and St Andrew's Primary School in a residential area of Gorebridge, close to local transport links, shops and community services.

The setting is registered to provide a care service to a maximum of 76 children at any one time who are currently attending primary school and S1. Until April 2024, the service may provide care for a child in S3.

About the inspection

This was an unannounced inspection which took place on 15 August 2023 between 09:30 and 15:00. The inspection was carried out by one inspector 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 children using the service
- received four on line questionnaires from parents
- spoke with staff and management and received one on line staff questionnaire
- observed practice
- reviewed documents

Key messages

- Children were happy and engaged in play.
- Staff interactions with children were kind, caring and nurturing.
- Children have a clear sense of belonging in the setting.
- Staff worked well together as a team, creating a positive ethos within the setting.

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 there were a number of important strengths which, taken together, clearly outweigh areas for improvement.

Quality Indicator 1.1: Nurturing care and support

Children were happy, relaxed and having fun at their 'back to school party'. A child told us "We are having a party, I'm wearing my party shoes. I was excited about the party". Children experienced nurturing care and support from staff who took time to listen and respond to their needs and wishes. This supported children to feel valued and respected.

Staff used praise and encouragement to support children in a meaningful way and to create an inclusive environment. Children had developed positive relationships with each other, and we saw them adapting play ideas to include younger children. Children told us "We are all good friends", "The staff are good - they look after me", "The staff listen to what we want to do" and "If I was upset, I would go tell the staff". This demonstrated that children felt included and that they mattered in the setting.

Children were treated as individuals by a staff team who knew them well. All parents who responded to our survey strongly agreed that staff knew their child well, including what they liked and what was important for their care. Parents told us "The service is provided with care and compassion. The team work hard to ensure each child is not only physically safe but provide an environment with non-judgement and wellbeing in mind" and "Relaxed and friendly environment, adapted to each child, parents are involved, positive environment, each child respected as an individual".

Staff worked closely with families to gather a range of information which supported children's needs. Personal plans were updated at the start of each term, ensuring information was current to assist staff in meeting individual needs. This included medical requirements, allergy information and emergency contact details. Staff were able to tell us about children's unique needs and how they met them. However, medication flow charts needed to be reviewed to ensure they were individualised to each child. Staff wrote basic notes to demonstrate how they supported children with additional support needs. However, these did not go far enough to give clear guidance. They lacked in detail around approaches on how staff supported children's learning and development requirements or progress tracking. Staff took immediate steps to address this for one child. The setting should improve this for all children who have specific needs or medical requirements (see area for improvement one).

Mealtimes were a calm and sociable experience. Staff sat with children to support conversations where children spoke confidently about their families, feelings and going back to school. Fruit was available for children should they wish to have something to eat between meals and snacks. A parent told us "Nutritious snacks are provided". Staff were encouraging children to have a drink of water. Children told us "We go to the water fountain if we want a drink" and "Snacks are nice, we made smoothies". This demonstrated that food choices were nutritious, and children were kept hydrated.

Quality indicator 1.3: Play and learning

Staff were positive role models to children during play. They listened to, and encouraged conversations and joined children in activities showing a genuine interest and knowing when to intervene to guide them in

positive play. This helped to create a respectful ethos within the setting.

Children were engaged in fun activities, and they confidently explored the spaces and resources available to them. The indoor environment offered children access to play resources which mostly suited their stage of development. Children spoke positively about their after-school club. Example comments included "We get to play with lots of toys", "I like playing outside and making dens", "We can stay in if we don't want to go out", "I like the x box, we get ten minutes to play on it" and "We can do any painting we want, we get to choose".

A floor book demonstrated children had opportunities to access a variety of different activities including celebration days and craft activities. This gave examples of children's voices and drawings and supported the ongoing development of play and learning opportunities. This was confirmed by parents who told us "That staff are great and offer a great range of activities. My son really enjoys going", "Good activities for kids to do" and "The holiday club has variety of activities each day".

Areas for improvement

1. To promote children's safety and wellbeing, the provider should review personal plans to ensure they contain detailed strategies to support and track progress of children with additional support needs. Medication records should be reviewed to ensure they are individualised to each child.

This is to ensure 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 a my wishes and choices' (HSCS 1.15).

How good is our setting? 4 - Good

We evaluated this key question as good, where there were a number of important strengths which, taken together, clearly outweigh areas for improvement.

Quality Indicator 2.2: Children experience high quality facilities.

Children were cared for within two community rooms and a creche room located in the primary school. The creche room had direct access to the playground which enabled children to benefit from fresh air and energetic play. Due to there being a party going on, we did not observe children in the outdoors. However, we were told that on a typical day children would have been outdoors. In our questionnaire, all parents strongly agreed that the setting was well furnished, comfortable and homely. A parent told us "The manager and their team provide a wonderful environment for our children".

The indoor play spaces available to children would benefit from further developing calm, nurturing spaces for children to take part in quiet activities. This would help support some children who may need assistance with regulating their emotions or to support children who may need to rest. Staff should involve the children in the development of calm, cosy play spaces.

We asked children about their walk to and from school. They were clear of boundaries to help keep them safe, as they told us "We don't go on the road", "We need to stick with a person" and "We have to catch up if you are going too slow". A parent told us "I feel my child is in safe hands whilst I'm at work and know any issues are communicated immediately and resolutions sought quickly".

Staff adhered to infection, prevention, and control procedures, including regular hand washing. This helped minimise the risk of spreading illness and infection among staff and children. Staff should keep the snack preparation area clear of resources and other items to ensure a safe and hygienic environment for food preparation. This will help prevent the risk of cross-contamination and support staff to adhere to food safety standards.

How good is our leadership? 4 - Good

We evaluated this key question as good, where there were a number of important strengths which, taken together, clearly outweigh areas for improvement.

Quality Indicator 3.1: Quality assurance and improvement are led well

The manager regularly spent time in the setting which supported them in building a good relationship with staff and children. This meant the manager had a good overview of the setting and how it was meeting children's individual needs. Positive working relationships between the manager and staff promoted a partnership approach to providing quality care, play and learning. Staff told us "It's a nice place to work" and "The manager is always there to support us".

Parents spoke positively about the management of the setting, telling us "Team and leadership is great" and "I would highly recommend this service to others and feel the team deserve credit for their hard work and efforts".

Management and staff told us they valued the views of children and their families. Verbal discussion provided opportunities for responsive feedback from parents. Children were informally encouraged to share feedback about their experiences and activities they were involved in. We observed staff consulting with children throughout their session and acting on their ideas for play. In our questionnaire, all parents strongly agreed with the statement 'My child and I are involved in a meaningful way to help develop this setting and our ideas and suggestions are used to influence change'. A parent told us "Great communication, parents kept in the loop of what's going on".

Improvement planning work was at an early stage and the manager was beginning to develop more formal approaches to self-evaluation. Staff should now become familiar with the Care Inspectorate "A quality framework for daycare of children, childminding and school-aged childcare" (Care Inspectorate, 2022). This could be used to support staff and children's contributions to the development of a service improvement plan that clearly sets out the setting's priorities and expectations for improvement.

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

The staff team worked well together and were courteous and respectful to each other. This provided a happy and relaxed environment for children. In our questionnaire, all parents strongly agreed with the statement 'I am confident that staff have the appropriate skills, knowledge and experience to care for my child and

support their learning'. Parents were complimentary of the staff team, describing them as "Caring staff", "Very good and kind", "Great" and "Amazing - a credit".

Children benefitted from a settled staff team where ratios were maintained, and the deployment of staff allowed children to access play areas available to them. This was confirmed by a parent who told us "Really good that there has been high retention of staff which means the staff know the kids really well".

Staff were experienced in working with school age children. Through discussion they demonstrated a commitment to support children and families by promoting positive interactions and building relationships. We observed staff interacting respectfully with children and as a result, they felt valued. Staff had a good understanding of how to support children's varied developmental stages and were enthusiastic in their approaches when joining play experiences.

Staff appraisals provided opportunities for staff to celebrate their successes, identify areas for improvement and training opportunities. Core training had been completed for most staff. Moving forward the manager should ensure staff reflect on their learning so children are supported by knowledgeable staff who consistently implement learning from training within their practice. A parent told us "Through the FB page families are kept up to date when first aid training etc is carried out which provides reassurance". This demonstrated that parents were kept up to date with staff training.

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 ensure children experience high quality care the provider should develop further self-evaluation systems to assess the quality of the service. This should include priorities for improvement and how these improvements will be achieved.

This is to ensure the quality of the environment is consistent with the Health and Social Care Standards which state that 'As a child, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 9.19) and 'I experience high quality care and support because people have the necessary information and resources' (HCSC 4.27).

This area for improvement was made on 7 July 2022.

Action taken since then

As noted in quality indicator 3.1: Quality assurance and improvement are led well, the manager had begun developing an improvement plan. This area for improvement had 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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