Wee Gems Armadale
Day Care of Children

Wee Gems Nursery
2 Southdale Avenue
Armadale
Bathgate
EH48 3AA

Telephone: 01501747130

Type of inspection:
Unannounced

Completed on:
25 October 2024

Service provided by:
Wee Gems Armadale Ltd

Service provider number:
SP2023000471

Service no:
CS2024000020

About the service

Wee Gems Armadale is registered to provide a care service to a maximum of 110 children aged between 3 months and primary 7 at any one time:
- no more than 33 are aged under 2 years
- no more than 25 are aged 2 years to under 3 years and
- no more than 32 are aged 3 years to those not yet attending primary school full time
- no more than 20 are of primary school age.

Situated in the south area of Armadale, West Lothian, the service benefits from being close to local amenities such as shops and transport links. Parking is available at the service. Children of different ages are accommodated in a separate baby room and a school age childcare room, while an open plan large area is divided up for use. A secure garden is accessible for outdoor play.

About the inspection

This was an unannounced inspection which took place on Wednesday 23 October 2024 between the hours of 08:50 and 16:15. We returned to complete the inspection on Thursday 24 October 2024 between the hours of 09:00 and 16:40. The inspection was carried out by two inspectors from the Care Inspectorate. A third inspector was present on day one as part of a shadowing exercise.

To prepare for the inspection we reviewed information about this service. This included the registration report, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:
- spoke to and interacted with children using the service
- spoke with staff and the area manager
- observed practice, daily routines and children's experiences
- reviewed documents in the service relating to children's care, play and learning
- took into account feedback we received from 20 families.

We provided feedback to the depute manager, provider representative and the local authority representative on Friday 25 October 2024.

Key messages

Overall, children received good care and support, however the consistency of this should improve to benefit all children all of the time.

School aged children would benefit from their service being planned and prepared for them prior to arrival, to ensure they receive the best possible outcomes.

Children were cared for in a safe and stimulating environment, which should continue to develop to ensure high quality play experiences and opportunities.

Children had enough staff to support their needs, however the deployment of staff should be further considered to enhance outcomes.

The service was continuing to develop a shared leadership approach, where everyone involved contributes to 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. However, improvements are required to maximise wellbeing and ensure that children consistently have experiences and outcomes that are as positive as possible.

Quality indicator 1.1: Nurturing care and support

Children were generally nurtured and supported throughout their daily experiences through kind and warm interactions. For example, individual welcomes in the morning and comfort when needed, helped to make children feel loved and secure. However, some interactions were not fully supportive and respectful of children. For example, younger children having their play interrupted for practical tasks such as nappy changing, or children's noses not being cleaned when needed. Management was committed to improving outcomes for children and were promoting consistent care through quality assurance processes.

Mealtimes were free flow for older children which meant that they could choose when they wanted to eat. Younger children had a group experience where they all ate together. Children of all ages had some opportunities for independence and the building of new skills. For example, they could serve their own food with support when needed. School age children had a limited snack experience and so this should be improved. For example, an inconsistent approach to reducing risk and enhancing infection prevention, meant that some children ate on the floor while others ate while they played. Food experiences in general should continue to be developed to ensure children are consistently safe and have further opportunities to be involved in food preparation, serving and cleaning. This will help increase children's sense of responsibility and independence skills.

Children's individual wellbeing was benefiting from good use of personal planning. Relevant and current information about children's needs and preferences was used to inform their care and support. As a result, children were generally experiencing consistent care in their daily routines. Personal plans could be further developed by consistently monitoring children's progress. This would inform staff of whether the support is effective for the child or not. Where needed, children had additional support plans. Working in partnership with the parents and other agencies meant that children got the support they needed at the right time. Moving forward, quality assurance processes should be used to ensure support strategies are being consistently used for children.

In general, children's medical and allergy needs were managed effectively to keep children safe and healthy. Health care plans were in place to inform staff and aid consistent and individual approaches to support children. To further enhance health and medication management, more effective communication systems should be developed. This would ensure all staff have a sound knowledge of children's medical and dietary needs or be able to check them quickly when needed.

Quality indicator 1.3: Play and learning

Children had fun as they experienced play, learning and development opportunities. Their engagement and enjoyment was demonstrated in their laughter, chatter and general exploration. A mix of free play and planned activities offered children choice and opportunities to lead their own learning. They were confident and familiar with the spaces and resources. All parents who offered feedback, felt their child's development

was supported through play experiences. A parent said, "My child loves being in the garden and when they are taken on walks by staff to the parks or surrounding area. They love to use the building blocks, water play and take part in dancing and singing as well as using the role play and climbing frame areas".

Children were often empowered to be involved in their play and learning through interactions and actions of staff. Staff used effective questioning at times to extend children's thinking and enquiry skills, such as problem-solving. Literacy and numeracy development was supported in a range of ways. For example, through the use of visual symbols and print. Staff modelled vocabulary for children through general conversation, storytelling and singing. Moving forward, a consistent approach to quality interactions should be promoted, to ensure learning outcomes are secured for all children.

Experiences and opportunities for learning were planned based on children's individual needs and interests. Management had identified that staff were at different stages of skill and confidence in demonstrating their knowledge of child development and relevant theory. Continued support was planned to develop this further.

Management had identified a staff training need around writing quality observations to share children's progress with parents. This was improving following recent training. Further work continues to ensure the observations highlight significant learning for children, which would show progress in individual learning goals.

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. However, improvements are required to maximise wellbeing and ensure that children consistently have experiences and outcomes that are as positive as possible.

Quality indicator 2.2: Children experience high quality facilities

The setting was well-furnished and comfortable giving children a home from home experience. Children looked comfortable and confident moving around the spaces, which meant they were familiar with their surroundings. They could sleep and rest in cosy areas when needed, which was comforting. However, the noise and lighting in the large room impacted on children at times. The service should consider this moving forward, particularly at key transition times such as lunch and sleep. This would benefit children's emotional wellbeing.

The setting was safe, secure and generally well-maintained. Regular headcounts ensured children were accounted for and staff were vigilant about places children would hide in the garden. Secure entryways kept children safe and the garden was secure also. The setting had undergone recent refurbishment including painting, new blinds and flooring. Toilets and nappy changing areas had also been upgraded, which meant more spaces for children to use when needed. A system was in place to identify and action the repair or replacement of resources. These should be carried out in a timely manner to prevent disruption to children. Overall, children were cared for in a setting which respected their comfort and wellbeing.

Infection prevention and control measures were in place such as touch-point cleaning and handwashing at relevant times. However, some consideration should be taken for children's use of the bins with lids and shoes being stored on children's sleep mats, in order to further reduce the risk of infection spread.

The indoor and outdoor environments were developmentally appropriate spaces for children of different

ages and stages. Each room had low furniture for children's comfort and access. Core resources were available in each room such as sand, water, and dough to encourage creativity and experimentation. Some loose parts and real items were on offer to add a more authentic aspect to children's play. These should be extended and incorporated into all areas to add depth and quality to play experiences. Furthermore, play spaces would benefit from enhanced provocations to promote intrigue, independence and curiosity. This would make play spaces more interesting for children and invite them in to play.

Each room had direct access to the garden. Preschool children could free flow between inside and the garden for most of the day. However, younger children all moved as a group in and out, which restricted their choice and freedom. This should be addressed to ensure all children can choose to be outside if they wish.

School aged children had their own room, however it was not set up for their arrival each day. This meant that children had to wait for activities and experiences while staff prepared them. Management should consider how to give a clear message to school aged children that they are valued and considered.

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. However, improvements are required to maximise wellbeing and ensure that children consistently have experiences and outcomes that are as positive as possible.

Quality indicator 3.1 : Quality assurance and improvements are led well

A shared vision, values and aims positively informed practice. Recent work had been done to review the values of the service with parents, children and staff. Staff changes had resulted in a settled team and an supportive culture. This positively influenced experiences for children. In general, children experienced a provision which reflected respect and freedom to play.

Children and families were becoming more involved and were starting to influence change within the setting. Parents were regularly asked for feedback about aspects of the service. This was starting to be used to inform changes, such as the planning of open evenings. Steps were being taken to share with parents how their feedback was being used. This gave a strong message that parents input mattered and would be listened to. In addition, parents were welcomed into the rooms to drop-off and collect their children which contributed to good relationships. A parent said, "I don't feel rushed out when I drop my child off, I can wait to ensure she is settled in and when I leave if she is upset I get an update on the app after I leave usually". Management were aware of the need to build staff confidence around engaging with parents. This would further support conversations about children's needs. A parent said, "The famly app is very good and if we need to get in touch with the team we always get a quick response via the app".

Management had a good overview of strengths and areas for development in aspects of the service and with individual staff. The training and support opportunities being planned for staff demonstrated this knowledge and commitment to improve. Staff were being supported to reflect on their practice, learning and the play spaces for children. This contributed to staff using their new knowledge and children's feedback to aid improvements.

Quality assurance, including self-evaluation and improvement plans, were in place and were mostly leading to continuous improvement. A range of quality assurance processes took place at different levels from the

local authority to management and within the rooms. As a result, issues highlighted in the inspection had been identified. Some had been actioned to improve outcomes for children and others were in progress. Management should ensure improvement changes are fully embedded in daily practice to make them purposeful for children.

The improvement plan was a result of quality assurance and self-evaluation. This meant it was a working document which reflected the service's current strengths and needs. Improvements already made, demonstrated the staff teams capacity for taking guidance, responding to people who use the service and using best practice to aid changes. A shared leadership approach was being fostered and should continue to develop so everyone has ownership of continuous 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. However, improvements are required to maximise wellbeing and ensure that children consistently have experiences and outcomes that are as positive as possible.

Quality indicator 4.3: Staff deployment

Levels of staff were effective in ensuring good outcomes for children. There were enough staff present to ensure children's safety and comfort throughout the day. A parent said, "I feel my child is well looked after and is in a safe environment and in good hands (well trained and friendly practitioners)". Transition points such as lunchtime were supported by management to ensure the right level of support for individual children. Staff positioned themselves widely in rooms to ensure general supervision of children. The levels of staffing also allowed regular breaks to take place so staff continued to be refreshed for children. A staffroom provided a quiet place for them to go.

While the level of staffing was good, how staff were deployed could be improved to ensure children's rights are consistently upheld, including children's sense of autonomy. For example, children moving to the garden as a group, or lunch as a task getting done, with low level engagement for children.

Overall, staff were flexible and supported each other, reporting positive working relationships. They communicated their movements to each other and shared information about children's needs throughout the day. A parent said, "They seem to know my child well and even staff that don't work directly with them know and are familiar with them". Management should continue to build staff confidence in guiding and challenging each other as well as using their own initiative. This would help embed a culture of continuous improvement where everyone takes responsibility.

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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