

The Teddy Bear Developmental Playgroup Day Care of Children

Cullen Nursery School
Old Church Road
Cullen
AB56 4UZ

Telephone: 07376624799

Type of inspection:
Unannounced

Completed on:
24 May 2023

Service provided by:
The Teddy Bear Developmental
Playgroup

Service provider number:
SP2003001950

Service no:
CS2003008955

About the service

The Teddy Bear Developmental Playgroup is registered to provide a care service to a maximum of 8 children at any one time, aged from 2 years to not yet attending primary school age.

The service operates from a small area/playroom situated within Cullen Primary School Nursery. It has the use of a sensory room that is located within the nursery. There is direct access to the large secure garden at the rear of the premises.

About the inspection

This was an unannounced inspection which took place on 17 and 18 May 2023 between 1.15pm and 5.30pm. 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:

- communicated with four parents
- spoke with two staff and the manager
- observed practice and children's experiences
- reviewed documents.

Key messages

Children's wellbeing was being well supported as staff responses towards the children were thoughtful, calm and respectful.

Families had been involved in the creation of the child's personal plan, to help identify individual needs and interests to support consistency of care.

Creative approaches engaged children's imagination and enriched their exploration, play and learning.

The indoor and outdoor environments were sensitively structured and took account of the children's stages of development and learning.

The new manager was clearly motivated in their role as a leader of the setting and recognised the benefits of establishing priorities.

To enhance the delivery of high-quality practice that leads to improved outcomes for all, the manager/provider should ensure that a strong ethos of continuous improvement is established, that includes quality assurance and self-evaluation.

Whilst there had been changes to the small staff team, staff worked well together and the culture was one of support and respect.

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?	3 - Adequate
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/people and clearly outweighed areas for improvement.

1.1 Nurturing care and support

Children's wellbeing was being well supported as staff responses towards the children were thoughtful, calm and respectful. Personal care routines also nurtured children's confidence and supported positive relationships as interactions with staff were warm and caring.

Children enjoyed eating their snack together, it was unhurried and calm and provided a positive social experience. Staff sat with the children and were able to focus on the individual needs of the children and staff recognised that it also provided a rich opportunity to support attachment. Food choices reflected current guidance and complied with children's dietary needs and/or food preferences. Fresh water was available to the children during snack. Arrangements were also being put in place so that water was readily available to the children whilst at the service, to help them remain hydrated.

The manager and staff recognised the benefits of children and families being central to the process of information sharing. Families had been involved in the creation of the child's personal plan, such as health, interests and likes/dislikes, to help identify individual needs and to support consistency of care. We discussed with the manager, how refining the level of information and organisation of the personal plan would help staff to respond quickly and sensitively to changes. We discussed the SHANARRI wellbeing indicators (represents a basic requirement of what children need to grow and develop - Getting It Right For Every Child) that helped to promote positive outcomes. The manager intended to incorporate them into the planning process to help support the overall wellbeing of the child.

Staff were working proactively with the relatively new children, families and other professionals to identify strategies based on individual needs that helped children's development. Children attending the service were non-verbal, staff used non verbal communication cues and signs well to support children. Staff demonstrated an awareness of the potential impact of adverse childhood experiences. They were keen to implement supports to build the resilience of children and families where needed.

Parents told us that they felt fully involved in their child's care and that they were happy with the care and support given to their child. Staff used non verbal communication well and understood the child's want and needs.

1.3 Play and Learning

Children were actively involved in leading their own play that included spontaneous and planned experiences. Creative approaches engaged children's imagination and enriched their exploration, play and learning. Play experiences helped children to develop skills in language, literacy and numeracy. A young child was listening to nursery rhymes and moving their body. A child was stretching out the water hose to see how far it would go and having fun with repeating the actions that helped their brain to develop. A child was also enjoying the sensation learning to swing and communicating to staff when they wanted to be pushed. Children were becoming familiar with the sensory room, that helped them to regulate their

emotions. The calm and purposeful atmosphere helped children to be engrossed and motivated in their play.

Children were actively involved in leading their play; that helped them to express their interests and learning. Parents told us that staff introduced different things to keep their child interested. They had seen a change in positive behaviours although they had only been attending for a short time. Children moved around the play areas independently and confidently, they were clearly becoming familiar with their surroundings. Children were able to choose between indoor and outdoor play. The large garden enabled them to benefit from being in the fresh air and to participate in creative and active play.

Staff used their knowledge and practice to support quality play and learning experiences. They supported the emotional resilience of the children through holistic and nurturing approaches that secured their wellbeing and right to play.

The relatively new team were working well together. Staff had accepted external support and guidance, they were consolidating a method of observation and assessment that recorded children's progress and recognised their achievements. A clear foundation had been established so that information enabled staff to respond to children's needs, and helped to ensure they developed a broad range of skills.

How good is our setting?

4 - Good

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

Children benefited from being cared for in a comfortable and welcoming setting that was well furnished with wooden tables and chairs and child level shelving units. Neutral decoration and floor to ceiling windows provided natural light, that helped to promote psychological wellbeing. It gave the message that children mattered.

The setting was clean and well maintained and staff were clear about the arrangements for cleaning in the service. Infection prevention and control followed best practice, such as good hand hygiene and personal protective equipment (PPE) that supported the wellbeing and safety of the children. We suggested that involving all staff in the review of early years infection control good practice guidance, would also help to ensure consistent approaches were maintained. Staff had completed first aid training so that they were able to respond appropriately should an accident occur. They had also completed food hygiene training to support food safety.

Overall, staff worked well together to remove risks to the children both indoors and outdoors. This helped to ensure that children's activities were not compromised that they were supported to explore and enjoy challenging, fun play experiences. We referred the manager to SIMOA (keeping children safe) campaign - hub.careinspectorate.com. The documentation was beneficial for consideration of security and ensuring a safe environment for children.

The indoor and outdoor environments were sensitively structured and took account of the children's stages of development and learning. The playroom was being arranged to reflect children's interests and curiosities and was equipped with appropriate resources and materials to support learning. A cosy/quiet space within the room was being further developed so that it was inviting and calm for the children and promoted rest/recuperation. The large secure garden was shared with the local authority nursery, it enabled children to explore with loose parts materials and to build social and problem solving skills.

How good is our leadership?

3 - Adequate

We evaluated this theme as adequate, where strengths only just outweighed weaknesses.

The new manager was clearly motivated in their role as a leader of the setting and recognised the benefits of establishing priorities. Although they had been in post for a relatively short period, they had started to implement processes that supported staff in working together to support children and families. Staff had a clear understanding of their daily roles to help ensure smooth delivery of the service.

Parents told us that both them and their child felt involved in a meaningful way. Staff were lovely and really approachable and open to suggestions, they were always helpful and supportive.

Newsletters and a closed social media platform helped to inform parents of events and changes within the service. Children were able to lead their own learning and their needs also influenced wider activities. We suggested that refreshing the vision for the service so that it also reflected the aspirations of children, families and the wider community, would help to promote what was important.

The service had recently started operating again after a substantial period of being non operational. Policies and procedures for the service had been reviewed and documentation for the service had been updated to support a consistent approach to practice. Staff reflected well together and were using those reflections to bring about positive change to outcomes for children. There had been an opportunity for new parents to share their initial views about the service. Leaders were keen to establish methods that enabled children, families as well as partners to share in the development of the service. The culture of self-evaluation for improvement was at an early stage of development and systems of quality assurance were just being established. (see area for improvement 1)

Ref:

How we support improvement and A quality framework for daycare of children, childminding and school-aged childcare - hub.careinspectorate.com

Self evaluation for improvement, your guide - careinspectorate.com

Areas for improvement

1. To enhance the delivery of high-quality practice that leads to improved outcomes for all, leaders should ensure that a strong ethos of continuous improvement is established, that includes quality assurance and self-evaluation.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership.' (HSCS 4.7); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19).

How good is our staff team?

4 - Good

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

The service was appropriately staffed and leaders recognised that it was essential to the wellbeing of children in the service.

Suitable arrangements were in place to promote continuity of care and to ensure positive transitions. The nature of the service did not entail staff having planned breaks, staff sat with the children at snack time.

Whilst there had been changes to the small staff team they worked well together and the culture was one of support and respect. Staff communicated well with each other to ensure appropriate supervision and quality engagement with children. Families had been kept informed of any changes to the staff team

Staff were building a positive relationship with each other and the new manager. Children experienced a warm and respectful atmosphere that was conducive to their wellbeing and learning.

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 enhance the delivery of high-quality practice that leads to improved outcomes for all, leaders should ensure that a strong ethos of continuous improvement is established, that includes quality assurance and self-evaluation.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership.' (HSCS 4.7); and

'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 29 April 2019.

Action taken since then

This area for improvement has not been met and remains in place.

Previous area for improvement 2

2. The manager/provider should complete and submit documentation related to the inspection process and notification reporting.

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

I use a service and organisation that are well led and managed (HSCS 4.23).

This area for improvement was made on 29 April 2019.

Action taken since then

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?	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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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