

Torphins Playgroup Day Care of Children

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Type of inspection:
Unannounced

Completed on:
28 August 2024

Service provided by:
Torphins Playgroup

Service provider number:
SP2003000409

Service no:
CS2003002532

About the service

Torphins Playgroup is registered to provide a care service to a maximum of 18 children aged 2 years to those not yet attending primary school.

The service is accommodated in a single storey building, located in the village of Torphins, Aberdeenshire, close to the local primary school and amenities like shops and parks.

About the inspection

This was an unannounced inspection which took place on 26 August 2024 between the hours of 08:50 and 15:30 and 27 August 2024 between the hours of 09:00 and 15:00. The inspection was carried out by an 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 during their play.
- Received three parent/carer online questionnaires.
- Received three staff online questionnaires.
- Spoke with staff, management and the chair person of the committee.
- Observed practice and daily experiences.
- Reviewed documents.

Key messages

- Children were settled and happily engaged in play and learning.
- Children led their own play through a well-balanced mix of activities both indoors and outside.
- Children received nurturing care and support from staff who knew them well.
- The setting makes good use of community links to support children's experiences and a sense of belonging.
- The staff team were motivated and enthusiastic about their roles and were keen to continue to take on training to develop their practice.
- To ensure high quality play and learning experiences for children, planning, tracking and next steps should continue to be an improvement focus.

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?	5 - Very Good
How good is our staff team?	5 - Very 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

Children experienced warm and nurturing care from committed staff. Children were settled, relaxed and confident. When children needed comfort or requested cuddles we saw that staff were responsive to their needs. Positive attachments had been formed which supported children to feel secure and loved.

Staff knew children well and were able to confidently discuss their interests, likes, dislikes and support that had been put in place. Most parents felt they had a strong connection with the staff. One parent said; "Very caring, nurturing and understanding staff. Another parent said; "All the girls are lovely friends and great with the kids, my child has become very attached to them all."

Personal plans were in place for all children. The service was in the process of changing the format of personal planning, using the wellbeing indicators. This would ensure they gathered meaningful information, supporting children to receive care and support that is right for them. Plans should be reviewed regularly with families to make sure they contain relevant and up to date information. As a result, staff would have access to key information allowing them to consistently offer children care and support tailored to their needs.

Mealtimes had been an improvement focus, with staff taking leaderships roles to support this. Children ate food that was nutritious, plentiful and supported their dietary needs and preferences. There were opportunities for children to have choice and develop independence such as choosing where to sit, serving food, pouring drinks and scraping plates. We highlighted that there was scope for this to be developed further with children being involved in the preparation of snack. Staff sat with children supervising and supporting them as they ate which also provided a nice social experience. Consideration should be given to snack times to ensure enough staff are available to promote a sociable mealtime experience.

Medication was stored safely and securely, easily accessible to staff but out of the children's reach. Medication records contained the relevant information to help staff with safe administration. We found however that forms did not have enough information with regard to signs, symptoms and emergency procedures. We asked that the service make their auditing systems more robust, to ensure their procedures consistently follow best practice.

Quality indicator 1.3 Play and learning

Children had fun and were fully engaged throughout the inspection. Staff were responsive to children's interests and supported their choice in where they played. The pace of the day was relaxed and unhurried, which meant children had time to explore their ideas and practice new skills. Children had opportunities to lead their play, they were active, experimenting and using their imagination. Children enjoyed using planks outdoors to balance on and experimented with different ways of moving and jumping, used their arms for balance and held each others hands for support. When planks came apart, they problem solved to put them together again. Children were using the range of resources available to them well which supported their physical development and problem solving skills.

Interactions were calm, patient and encouraging. During discussions with children, staff adapted their pace and language which supported children's understanding and language development. Some staff were skilled at using open-ended questions to support children's learning. For example, the children were pretending to be dinosaurs outdoors. Staff used questions such as; "you've caught me, what happens next?" and "What type of dinosaur should I be?" and modelled stomping like a dinosaur. This extended the children's play, developing their thinking and supported their engagement in the activity. We discussed how this could be developed further across the team to ensure learning is meaningful and provides appropriate challenge for children.

Opportunities for literacy and numeracy were evident within children's play experiences. Adults read stories with children spontaneously and children sang rhymes as they played on rockers outdoors. Numeracy and language were being supported through play, for example when balancing on planks, children were talking about being high and making size comparisons about who was taller than who. They were keen to be the tallest and tried to stand on the highest part of the structure. Children would benefit from having access to a wider range of books and mark making materials throughout the environment, both indoors and outdoors. This would enhance the opportunities available for literacy and numeracy within play spaces.

Planning processes had been an improvement focus. We noted that changes aimed to help staff promote a balance of planned and responsive learning experiences for the children. This included the development of a planning floor book which highlighted children learning and experiences, using photographs and the children's voice, to support staff to evaluate learning. We discussed the benefits of the floor book being more readily available for the children to encourage reflection, promoting life skills, such as questioning, memory, investigating, and explaining.

The Learning Journals App shared stories including photos and captured children's learning through observations. This approach provided an opportunity for families to see their child's play and learning in detail. Most of the observations we sampled identified learning which helped staff to assess children's achievements and progress. This should now support staff to plan next steps in individual children's learning journeys. We had a discussion around staff being clear on children's next steps and using tracking information to inform future planning. This would fully support children's learning and development. **(See area for improvement one reinstated)**

Children benefited from good connections with the wider community. Children enjoyed exploring the local woods and park. They visited shops and the farmers market in the village to buy food for snack, baking and cooking. Local charities and businesses supported the playgroup. The Co-op funded a planting initiative and the local 'men shed' had plans to build a sandpit in the playgroup garden. The committee supported links with the church, fund raising opportunities and events for families, such as sports day. This contributed to children's sense of belonging and supported them to have opportunities out with the setting.

Areas for improvement

1. 1. To fully support children's learning and development, the provider, manager and staff to ensure implementation of comprehensive planning systems which effectively track, assess and support children's individual progress, including their next steps in learning.

This ensures care and support is consistent with the Health and Social Care Standards, which state that;

'I am supported to achieve my potential in education and employment if this is right for me. (HSCS 1.27) and 'I am encouraged and helped to achieve my full potential'.

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

Children experienced a homely environment that was well-maintained with plenty of natural light and ventilation. Children's artwork and family photographs were displayed in frames, providing children with ownership of their setting as well as creating a sense of belonging.

Resources were of a good quality. We discussed expanding what was on offer, including real, open ended resources and loose parts to promote children's imagination curiosity and creativity. We recognised it was the beginning of term and the setting had plans to do this over the coming weeks with the children.

The lay out of play spaces ensured that children could move around areas with ease and could access resources independently. Children were confident in moving around these spaces to explore their ideas and interests. They also had the freedom to transport resources to extend their play further.

Children had free flow access to an enclosed outdoor space most of the day which supported their health and wellbeing, extended their play and learning and gave children choice in where to play. Recent work had been carried out in the garden which provided the children with enhanced experiences. They had access to a diverse outdoor space including a wooded area, small hills, a rubber chipped area with a variety of resources to explore, planters for planting flowers and vegetables and a paved area for ride on vehicles. Children spent time on the swings, climbing up and jumping off the climbing frame, transporting water to make puddles, playing imaginative games and running through the woods. This supported them to be active and build confidence and resilience.

All parents told us their children always had the opportunity to play outdoors. One parent said; "There is a play kitchen with a variety of kitchen utensils which allows my child to pretend play and copy what he sees at home. He also enjoys playing in the ride on toy cars and exploring the different terrains of the garden which develop his balance and problem solving skills. Weather dependent, they often have water play and or sand out which is a great sensory experience for my child." Another parent said; "There are lots of outdoor activities she enjoys and plenty space for her to explore independently in a safe environment."

Systems were in place to support keeping children safe. Robust risk assessments helped staff to mitigate risk and enhanced children's safety. We discussed the benefits of involving children in developing their skills and awareness of staying safe by providing opportunities to carry out risk assessments of their play spaces and experiences. The service used the Care Inspectorate's SIMOA campaign which allowed staff to reflect and review safety systems. We suggested using this to support children's understanding of risk and staying safe.

Risk assessments were in place to support adults and children to share toilets. This practice is not inline with current best practice. We directed the service to best practice guidance "Space to Grow and thrive" which states "staff toilets should not be shared with children and should not be counted when considering the overall number of toilets available for children."

We asked that the manager to take action to put alternative arrangements in place for adults to use a separate toilet. This was immediately actioned. Staff were now using the church building next door to access toilets. This is a short term arrangement with plans in place to create an adult's toilet within the play group building in accordance with building regulations. This supported the safety and wellbeing of the children. **(See area for improvement one)**

Infection control measures were understood and implemented effectively by staff. Overall, hand washing routines were generally effectively embedded. Staff should now ensure all children are supported to wash hands following mealtimes. Staff protected children by providing a clean and hygienic environment and PPE (personal protective equipment) was used at appropriate times such as nappy changing and food preparation. This contributed to keep children safe and well.

Areas for improvement

1. 1. The service should ensure that the children's toilets meet the needs and preferences of children, as well as to promote hygiene and safety. Separate toilet facilities for staff should be provided in accordance with building regulations, health and safety and work regulations, food safety regulations and the Equality Act (2010).

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

'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4).

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore, we evaluated this key question as very good.

Quality indicator 3.1 Quality assurance and improvements are led well

The service vision, values and aims had recently been reviewed in consultation with staff and families. These had been shared with everyone, ensuring that they were meaningful and captured the needs and wishes of those using and working in the setting.

Children's and families' views and suggestions about their care, play and learning were highly valued by staff. The feedback we received from parents highlighted that they felt they were involved in a meaningful way to help develop the service. Stay and play sessions included families in their child's experiences and provided time for the team to showcase the play and learning offered in the setting. Informal comments from this were positive and highlighted that parents had enjoyed seeing their children play and get involved in different types of learning. Feedback from a recent online questionnaire highlighted that parents found the setting friendly and relaxed and said staff were caring and had strong relationships with the children and they liked the outdoor space. Suggestions for improvement included more information in the 'Learning Journals' and at hand over times. The setting acknowledged these and parents are welcomed into the setting at pick up and drop off times for handovers. This ensured families felt listened to and a collaborative approach was taken to support improvement.

Staff told us they felt very well supported by leaders in the setting and were motivated to improve the service provided. One staff member said; "Manager is always supportive and I feel I can always go to her if there's anything wrong to meet my wellbeing needs. I couldn't recommend a better person to speak to, understand me and my needs." Another member of staff said; "When I have an idea at playgroup it's always taken on board and I'm always listened to when I've got an idea or suggestion. If I'm worried or stressed or unsure about something I know I can go to my manager or my lead about it." Staff told us they had champion roles, taking responsibility for areas such as mealtimes and tooth brushing. They discussed how they were leading this and supporting their team to make improvements. Regular staff monitoring acknowledged good practice and identified areas for development. Time was taken to discuss this with staff and make a plan together to support positive outcomes for children. Staff told us appraisals supported them in their role and with their professional development. This enabled the team to feel empowered and more involved in driving forward improvements.

An improvement plan identified relevant and meaningful areas for development. A self-evaluation floor book documented improvement planning and captured progress made. The staff team had engaged very well with care inspectorate practice notes, the quality framework and best practice documents such as 'My Creative Journey' to support self-evaluation. Staff and management told us that looking at scenarios in these documents had encouraged discussions and supported understanding around a variety of situations. This had allowed the team to put measures in place to support good outcomes for children. It was clear this system allowed the team to acknowledge their successes and helped to measure the impact improvements have had. This supported the pace of change and ensured improvement is maintained.

The setting was using a quality assurance calendar to support the procedures, audits and monitoring within the playgroup. These were evaluated and shared with staff to ensure everyone was clear and knew the outcome and the impact of these. As a result of our findings, for example around medication, highlighted that some additional audit checks be undertaken which would ensure that they were more robust and effective.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore, we evaluated this key question as very good.

Quality indicator 4.3 Staff deployment

Staff demonstrated genuine warmth, kindness and interest towards the children they cared for. This resulted in children who were very settled, happy and confident.

Communication with parents was very good and parents told us they were welcomed into the setting and had the opportunity to discuss their child's care, play and learning. Families were welcomed into the playgroup at pick up and drop off times and given very good hand over information regarding their child's day. We heard staff having conversations with parents about mealtimes and what their child had been doing. The setting sent out newsletters to families and used a communication board in the playgroup to share information with families, such as menus and activities. This supported a strong connection with families.

The leadership team recognised the importance of ensuring that the service was appropriately staffed at all times. Overall, the deployment of staff was effective, and they were flexible in their approach, communicating well with each other.

Although they had key areas of responsibility, they moved with children where needed, to support the running of the service and the needs of children. We highlighted that, on occasion, staff became task focussed, for example during children's snack time. This had already been recognised through recent staff monitoring and the setting were trying different approaches to ensure positive mealtime experiences for children.

Staff were appropriately qualified. Some were working towards gaining further qualifications and most staff had a very good knowledge of child development. They were able to discuss how they had identified individual areas for development and were supporting children with their speech, eating habits, independence and personal care. Parents told us they were happy with the overall care and support their child received at playgroup. One parent told us; "Getting to socialise with children their age and slowly becoming more independent from myself."

Staff were very committed to their professional development to ensure they delivered a high-quality service and improved outcomes for children. Staff had undertaken a range of learning which included formal training, professional discussions and self-directed reading. This supported staff to develop their knowledge and skills. As a result, children's care, play and learning was informed by current research and best practice. We would encourage the team to continue to reflect on their professional development, making use of the training logs that were available. We discussed adding reflection logs and refer to these regularly to support them to evaluate the impact training had and allow them to identify further training needs.

We discussed adding a reflection an few months later to support them to evaluate the impact training had and allow them to identify further training needs.

More recently recruited staff told us that their inductions were very effective had supported their knowledge and awareness of roles and responsibilities in their new position. The setting was already using the 'Early Learning and Childcare National Induction Resource' to identify key areas for development and set timescales. However, we discussed using the resource to encourage the use of questions and reflection which could be discussed at meetings, to further support roles, responsibilities and effective ways of working.

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

1. To fully support children's learning and development, the provider, manager and staff to ensure implementation of comprehensive planning systems which effectively track, assess and support children's individual progress, including their next steps in learning.

This ensures care and support is consistent with the Health and Social Care Standards, which state that;

'I am supported to achieve my potential in education and employment if this is right for me. (HSCS 1.27)
and

'I am encouraged and helped to achieve my full potential'.

This area for improvement was made on 30 September 2019.

Action taken since then

Planning processes had been an improvement focus. We noted that changes aimed to help staff promote a balance of planned and responsive learning experiences for the children. We had a discussion around staff being clear on children's next steps and using tracking information to inform future planning. This would fully support children's learning and development.

This area for improvement has not 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?	5 - Very Good
3.1 Quality assurance and improvement are led well	5 - Very Good
How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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