

Granny Smith's Day Nursery Day Care of Children

22 Ayr Street Troon KA10 6EB

Telephone: 01292 316 606

Type of inspection:

Unannounced

Completed on:

14 February 2023

Service provided by:

Janice Smyth trading as Granny Smiths Day Nursery

Service no:

CS2003005043

Service provider number:

SP2003001079



Inspection report

About the service

Granny Smith's Day Nursery is registered as a day care of children service to care for 12 children under 2 years, 20 children 2-3 years and 30 children aged 3-8 years of whom no more than 5 will be attending primary school but under 8 years old. It is located in Troon, South Ayrshire.

The service is within the town centre and is within walking distance to the local community including the beach. Accommodation is over two levels with a baby and toddler room on the ground floor. For children aged three years to eight years, the playroom is located on the second floor. Toilets can be accessed from each of the playrooms. There is also a sensory room, outdoor play areas can be accessed from the ground floor. The service is in partnership with South Ayrshire Council.

About the inspection

This was an unannounced inspection which took place on Thursday 2 and Tuesday 7 February 2023 between 09.30 and 16:30. The inspection was carried out by two 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 three people using the service
- received feedback from 14 parents/carers via email
- · spoke with nine staff and management
- · observed practice and daily life
- · reviewed documents.

Key messages

- Children experienced warmth, caring and nurturing approaches to support their overall wellbeing.
- Parents told us communication was a strength of the service.
- Children benefitted from opportunities to explore their wider community, for example regular visits to a local school and nursing home.
- The service was well led by management who demonstrated their commitment to the quality and improvement of the service.

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.

1.1 - Nurturing care and support

Children experienced warmth, caring and nurturing approaches to support their overall wellbeing. Children had formed secure attachments to staff and staff offered comfort and cuddles when needed. As a result children were happy and settled.

Personal plans were in place and updated regularly in consultation with parents. One parent told us, "I receive a new, up to date learning and care plan every three months. The new skills are always relevant to her stage of development and her interests". Staff had gathered a range of relevant and important information about children's current health and wellbeing needs. This supported staff to provide the right level of individual care for children.

Mealtimes were a calm and unhurried experience. Children in the 3-5 room were able to choose where they would like to sit and in the baby room staff sat with children and interacted and supported with feeding. This supported children to develop positive relationships with their peers and contributed to a sociable mealtimes experience. To support children to make healthy choices, meals and snacks were prepared onsite and menu planning took account of current nutrition guidance. One parent told us, "The meals are very good. There's only one thing that my child doesn't like, and an alternative is given if this happens, nothing is ever a problem". Fresh water was easily accessible to encourage children to remain hydrated throughout their day.

The management team and staff spoke positively about the strong relationships they had built with families. Parents also commented that communication was a key strength and discussed the ways in which management and staff keep them up to date, for example, Instagram. This supported parents to be involved in their child's care and learning.

Interactions during personal care were warm and caring. Staff asked children, "can I change your nappy", "can I wipe your nose? This supported staff in respecting children's rights. During our inspection we discussed the structured approach of the after lunch sleep routine in the baby room. We asked the service to ensure that all children experience responsive care in relation to their individual sleep cues..

Medication processes and procedures should be reviewed to ensure they are in line with the Care Inspectorate best practice guidance 'Management of medication in daycare of children and childminders'. For example, we found on one non prescribed medication form, the dosage stated for administering exceeded the recommended dosage instructions on original box and some medication was not always stored appropriately. Prior to the completion of this inspection the manger had put in place an audit. This will support the manager to effectively monitor medication stored on the premises. (See area for improvement 1)

1.3 - Play and learning

Children were meaningfully and actively involved in leading their play and learning. Planning approaches were responsive and we saw evidence of staff altering experiences to suit children's changing interests and development needs.

Some staff have a good understanding of child development and relevant theory, for example schematic play. We saw some evidence of children's individual schemas reflected in staff planning. This supported staff to scaffold and support children in a way that is meaningful to them.

Children's learning was enhanced through regular opportunities to visit places within their local community. For example, children benefitted from visits to a local school and nursing home. These experiences supported children to have a sense of belonging within their own and wider community.

Children's choice and independence was prompted and staff responded effectively to children's cues. For example we observed a younger child selecting a book and taking it to a staff member to read and a child reaching up for their jacket, indicating they would like to go outside.

Staff provided play experiences to support the development of children's skills in literacy and numeracy. For example we observed staff reading stories with children and experimenting with playdough. When asked about the play experiences available for their child, one parent told us, "they love it. Dance, yoga, arts and crafts, trips out, explore new food, read books, sing songs, work on language, social skills, daily routines, outdoor time. The list is endless".

Areas for improvement

- 1. To ensure children are safe, medication processes and procedures should be reviewed to ensure they are in line with the Care Inspectorate best practice guidance 'Management of medication in daycare of children and childminders. This should include but not be limited to:
- a) ensuring an appropriate system for monitoring medication stored on the premises is in place
- b) medication is stored in its original packaging
- c) dosages stated on the medication form do not exceed the recommend dosage on the medication guidance unless prescribed by a medical professional.

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

2.2. Children experience high quality facilities

Children experienced a warm and welcoming environment, which was clean and well furnished with plenty of natural light and ventilation. There was plenty of space for children to play together or alone if they chose to do so, and cosy spaces for children to rest and relax.

A sensory room was available for babies and toddlers to play together. We observed the babies and toddlers singing and dancing together. This supported children to build relationships and feel included. One member of staff explained that the shared garden and nurture room is very beneficial for support to children during key transition times from the baby room to the toddler room.

Children could lead their own play, we observed children accessing resources independently and easily at their level. Resources were in good condition and age appropriate. To continue to support children's imagination and creativity, the indoor environment would benefit from more loose parts and open ended resources. We asked the management team to consider how the addition of real items in the construction area and some more real resources in the home corner could further extend play.

Free flow access to outdoors was not available however, staff were responsive to children's requests to play outdoors. Outdoors, children had access to a large, fully enclosed outdoor play space including an outdoor bathroom, handwashing facilities, and heated outdoor cabins where some children enjoyed eating lunch during our visit. The nursery also had an allotment which provided children with the opportunity to grow and eat their own fruit and vegetables.

We observed all children happily engaged in various types of outdoor play, such as sand play, music wall, and playing with trucks. Staff responsively facilitated learning through providing additional resources such as sand, paper and crayons. Children's experiences could be further enhanced through supporting access to water for the water wall.

Risk assessments were in place across the setting and we observed staff carrying out a visual risk assessment in the toddler room prior to going outside to ensure that children experienced a safe environment. We discussed with the management team involving children in risk assessments. This will support children to assess and manage their own risks.

Staff demonstrated good infection control procedures, including supervising children during hand washing and washing hands after wiping children's noses and nappy changing. This supported staff and children to minimise the risks of infection.

The changing area in the baby room did not comply with the current infection control standards set out in Care Inspectorate 'Nappy changing facilities for early years learning and childcare services: information to support improvement'. We discussed this with the owner who advised plans were in place to fully enclose the area within the next few weeks. This will ensure children's privacy and dignity are respected and the

environment for children is safe and supports their health needs. Evidence was then submitted to confirm the work had been completed.

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.

3.1 - Quality assurance and improvement are led well.

The service was well led and the management demonstrated their commitment to the quality and improvement of the service. Some suggestions we made during our intimal discussions with the management had been actioned prior to the conclusion of this inspection.

The management team created conditions where all staff felt confident to initiate well-informed change and share responsibility for the process. For example staff were encouraged to be involved in committees that were of interest to them. This encouraged staff to take ownership of initiatives and develop their leadership skills.

Children and families' views were actively sought to inform the development of the setting. Monthly questionnaire and regular parents' evenings provided parents with the opportunity to have meaningful discussions with staff. As a result, parents felt informed and that their views used to make improvements to the service.

Robust self-evaluation and quality assurances processes allowed staff the opportunity to reflect together. Staff took part in peer evaluations using Education Scotland's self evaluation document 'How good is our early learning and childcare'. Staff used these reflections to effectively identify improvements. This supported staff to continue to provide a high quality service for children and families

A comprehensive improvement plan was in place and had been written in consultation with staff. We saw evidence that the identified improvement had already began to have positive impact on outcomes for children and families. For example, a display detailing children's rights with comments from children about what their rights meant to them. This supported children to feel valued and that they mattered.

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.

4.3 - Staff deployment

Staff communicated well to ensure the needs of all children were met. As a result, children were happy and confident.

Deployment and levels of staff were effective and ensured children had positive experiences across the day. The senior practitioner for the under three's department managed their time well to ensure very good levels of support for the staff team. As a result, staff felt valued and supported.

Daily tasks and some staff breaks were managed appropriately to ensure children's needs were continually met and that children experienced continuity of care. We discussed with the management that the under three's department could, at times, benefit from support during busier periods, for example lunch time. The

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manager advised this does already happen on a regular basis.

Within the staff team there was a good mix of skills, knowledge and experience. Staff demonstrated their willingness to develop and improve and regularly undertook training opportunities. To ensure training was meaningful, staff used a learning log to reflect on how training could improve and support their practice.

The staff team were flexible, ensuring unplanned absences were managed well to ensure continued positive experiences and high-quality care for children. The service employed bank staff which supported them in times of staff annual leave and sickness. As as result, children were cared for by staff who knew them well. One parent stated, 'We honestly can't thank Granny Smith's Nursery enough. Our child loves it there, I also like how every staff member no matter what room they are in, know all of the children'.

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	5 - Very 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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