

Fernielea School Nursery Day Care of Children

Stronsay Place
Aberdeen
AB15 6HD

Telephone: 01224 318 533

Type of inspection:
Unannounced

Completed on:
13 October 2022

Service provided by:
Aberdeen City Council

Service provider number:
SP2003000349

Service no:
CS2003014425

About the service

Fernielea School Nursery is registered with the Care Inspectorate to provide a care service to a maximum of 40 children at any one time between three years of age to those not yet attending primary school. The service currently operates between the hours of 08:00 to 18:00 Monday to Friday and offers part day and full day places.

The service is located in a residential area of Aberdeen, within Fernielea Primary school. The children are cared for in two linked playrooms each with integral toilets. There is a secure garden area adjacent to, and accessible from both playrooms. The school dining room is used for mealtimes.

About the inspection

This was an unannounced inspection which took place on Tuesday 4 October 2022 between 09:35 and 18:15 and Thursday 6 October 2022 between 09:15 and 15:30. We also undertook some inspection activity remotely. Feedback was provided to the service on Thursday 13 October 2022.

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, information submitted by the service and intelligence gathered since the last inspection. To inform our evaluation we:

- Spoke with children using the service;
- Spoke with two parents;
- Received feedback via email from two parents and carers;
- Spoke with staff in each playroom and the management team;
- Observed practice and children's experiences;
- Reviewed documents.

Key messages

Children were supported by staff who knew and responded to their needs very well.

Where children needed additional support from external agencies strong partnership arrangements were in place. Staff also worked hard to establish positive and trusting relationships with families. This partnership approach helped to ensure that staff support very positive outcomes for the children.

Children benefited from engaging in a range of play experiences which were child led and reflected their interests. Staff used their knowledge and skills to extend children's learning through their play.

A range of effective systems were in place which supported a culture of continuous improvement.

The service was appropriately staffed and effective deployment was consistently in place to ensure children were well supported. The staff were skilled and knowledgeable and this ensured that they supported very good outcomes for the children.

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?	5 - Very Good
How good is our setting?	4 - Good
How good is our leadership?	4 - 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?

5 - Very Good

Quality Indicator 1.1: Nurturing Care and Support

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

Children were nurtured and supported by caring staff. Parents fed back to us that they were very happy with the interactions the staff had with their children. Upset children were comforted and reassured which helped them to feel safe. Children developed confidence through staff acknowledging and praising their achievements.

Children were supported by staff who knew and responded to their needs very well. The team were committed to working in close partnership with families to get a holistic view of each child's needs. Building positive and trusting relationships with families was a particular strength of this service.

Where children needed additional support from external agencies this was managed very well by staff who were committed to working with others and implementing guidance and advice. Staff used strategies advised by specialist services to encourage communication and support children's emotional regulation. Clear and detailed information was recorded within children's individual personal plans which helped to ensure continuity of care.

New children to the nursery were supported to manage this transition at a pace which suited their individual needs. The management and staff thought carefully about strategies to support individual children to settle and this was leading to positive outcomes. Parents we spoke to were very positive about how their children had been helped to settle into nursery. They described a gradual process which met their individual child's needs, felt that their children were well supported and were happy with the feedback they received about how their children were settling.

A positive, relaxed lunchtime experience was enjoyed by the children. Children were supported to develop their independence skills including self-selecting food choices and clearing away their plates and cutlery. These opportunities were embedded in everyday routines as children were confident in carrying out these tasks. Staff sat with children so that they could be readily supported where required and so that they could respond immediately should an emergency, such as choking, occur. A flexible approach was used over mealtimes and snack times to ensure that individual needs were met. For example, where a new child to the service was finding the lunchtime experience in the dining hall overwhelming they were supported back to the playroom by caring and compassionate staff and settled very quickly. To further enhance this social experience staff could eat along with the children.

Children were offered water throughout the day to ensure that they were adequately hydrated. Although a system was in place for children to access their own drinks whenever they wished some children would find this difficult. This was discussed with staff who made the small changes that were needed to address this.

Staff had a very good understanding of family vulnerabilities and the impact of this on children's wellbeing. They understood their role in working alongside external agencies to ensure children were kept safe and well.

Quality Indicator 1.3: Play and Learning

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

Children benefited from engaging in a range of play experiences which were child led and reflected their interests. Staff used their knowledge and skills to extend children's learning through their play.

We observed children to be happy and have fun. A wide range of natural and open-ended resources offered children rich and meaningful play and learning activities across both the playrooms and outdoors. These included exploring, being creative, and problem solving. As a result, children were highly engaged in their play throughout the session. Some children, for example were engaged in making pictures from autumn leaves and other items they had discovered during their nature walk the previous day. Another child was using the conkers they collected to count and to sort out into different bowls using tweezers which they were enjoying immensely. Out in the garden area children were really enjoying making mud pies and mud soup using the range of pots, pans, containers and spoons. Staff used these natural opportunities to extend children's learning and to spark their imagination through skilled interactions. They recognised and praised children's achievements.

Staff had benefited from training on schemas (patterns of repeated behaviour children). This was helping them understand more about the children's play and think more about the resources children needed to support them with their schemas.

Observations of children's learning and their progression had improved and were clearly showing children's achievements and their next steps. Improving the observations had been a key improvement area for the team. The team had reflected on what most benefited the current group of families they supported and had acted accordingly. Staff were feeling much more confident in completing the observations and were able to recognise improvements in this area.

Parents we spoke with told us that generally communication was good, however, they would like to see it strengthened further in relation to play and learning. Suggestions included more updates on the IT platform used by the service and a weekly communication update about what activities the children did each week and what they learned. One parent told us that they would like more feedback about what their child was doing at nursery that could also be supported at home.

Children's choices and right to play were reduced at one point of the day as doors to the outside space were closed for a short period of time after lunch. This was discussed with the management team who agreed children should be offered free flow access between the indoor and outdoor space wherever possible. Free flow access had been available to the children throughout the rest of the day.

How good is our setting?

4 - Good

Quality indicator 2.2: Children Experience High Quality Facilities

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

Children experienced a setting that was welcoming and inviting. The playrooms benefited from natural light and ventilation. Furniture and resources were of a high standard and organised to support free flow play indoors and outdoors.

Children had access to a fully enclosed outdoor play space that was accessed by both playrooms. This provided opportunities for all children to play together. We found children to be supported to make use of the outdoor space at most times of the day taking care to ensure children were appropriately dressed for the weather. Children enjoyed using the trikes and ride-on's which helped promote their physical development and coordination skills. Access to fresh air, daylight and energetic play also supported children's health and wellbeing. The outdoor space available to use by children had been reduced due to an area sectioned off until work has been taken to make it safe. There had been a long delay in getting this work completed which therefore had an impact on outdoor play opportunities.

Children's creativity, imagination and problem solving skills were supported through a range of loose parts and open ended resources both indoors and outdoors.

The nursery had been working closely with a specialist autism service in response to individual children's needs and had made changes to the environment based on advice. This included creating a quiet and nurturing space in the corridor area and this had helped children to regulate their emotions. We suggested that it would be beneficial to increase opportunities to access quiet, calm and covered spaced within the nursery rooms and this was put into place.

Story book corners had been set up in both the playrooms and we saw children enjoy looking at the books and listening to stories. The area would benefit from the introduction of more non fiction and culturally diverse books. This could also be extended to other areas of the playrooms such as the home corner and construction area.

Children experienced an environment that was safe and healthy. There were appropriate infection control measures in place to support children's wellbeing. For example, children washed their hands at key times throughout the day. Staff positioned themselves appropriately when outdoors to ensure that they could see all areas of the outdoor space at all times. Staff regularly risk assessed the environment and had taken appropriate steps to address any small concerns through to completion.

How good is our leadership?

4 - Good

Quality indicator: 3.1 Quality Assurance and Improvement are Led Well

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

Staff worked towards a shared set of vision, values and aims for the service which positively informed practice.

A range of effective systems were in place which supported a culture of continuous improvement. The service, for example, had developed a detailed action plan following the last inspection. It was clear that they had listened very carefully to the feedback and considered very positively how they could make changes. We saw that the actions had been progressed including more flexible routines, more opportunities for children to be more independent and staff developing their knowledge about schemas. These changes had a very positive impact on the outcomes for the children.

Self-evaluation was evident in maintaining and improving the quality of care, play and learning. Staff were using the best practice resources 'How good is our early learning and childcare' and 'A quality framework for daycare of children, childminding, and school aged daycare' to reflect on their practice and identify areas that could be improved. This had helped to support the very good outcomes for children.

The management and staff were kept focused on the key improvements for the nursery through the development of the services outcome focused improvement plan. Adding a progress and review section would support the service to ensure that identified improvement areas are regularly revisited.

Formal feedback has been requested from staff and we found that good quality feedback had been obtained and then considered and actioned where appropriate. This further demonstrated that the staff were reflective practitioners, were outcome focused and that their input was valued from the management team.

While informal every day opportunities to support staff were in place, regular formal one to one protected time for staff and their line manager to meet would allow more focused opportunities for staff to reflect on and develop their practice.

Regular communication with families took place through a variety of methods, for example, email, online platforms and face to face discussions. This contributed to the positive relationships families had built with staff. As a result, children experienced continuity of care. Feedback from parents was that although they were generally happy with the quality of communication, they would like to see more updates about the activities their children had been engaging in on the IT platform used by the nursery and through their verbal interactions with staff. More formal opportunities to obtain feedback from parents and carers would further inform the services quality assurance systems.

The service had a range of audits in place which were working effectively and any identified actions were progressed. A personal plan audit was in place to ensure all required children's documentation was recorded. All records we looked at with the exception of one had all required information in place. More information was required in relation to a particular child's health needs. Staff took action during the inspection to address this.

How good is our staff team?

5 - Very Good

Quality indicator 4.3: Staff Deployment

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

A mixture of skills, knowledge and experience in the staff team contributed to positive interactions and play experiences for children. Staff were committed to their role with an enthusiasm for supporting children to reach their full potential. They were able to talk confidently about supporting children to transition into the service, develop their confidence and achieve their next steps in learning.

The service was appropriately staffed and effective deployment was consistently in place to ensure children were well supported. Staff breaks were planned around children's needs, for example there was plenty staff supporting children over the lunchtime period. This ensured that children were kept safe and enjoyed a relaxed and sociable lunchtime experience.

Two senior early years practitioners had been employed since the last inspection and were providing effective support and guidance to the team. They had sufficient protected time available to them to support the team and progress with significant improvements within the setting.

Following observations and evaluation the two playrooms in the nursery had been separated since the last inspection and staff reported that this had helped children to settle and for relationships to be formed more quickly. There was still the opportunity for children and staff to meet and mix outside and enter each of the playrooms. A rota had been developed so that staff were clear about where they were to be deployed during each session so that children's needs were able to be fully met. This was flexible, however, so that changing needs could be accommodated, for example, to support specific positive attachments.

Staff worked very well as a team, communicating effectively with each other to ensure that the service ran well and children's needs were consistently met. If a task took them away to support individual children, this was managed to ensure children were supervised and supported.

The team were motivated, interested in their roles and focused on supporting good outcomes for children. Staff told us that they felt valued and listened to. Unplanned absences were low which helped to ensure continuity of care and support for children.

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 keep children safe and well, the manager should ensure systems to support the safe administration of medication are robust. This should include, but not be limited to: a) accurate information recorded on the children's medical care plans; b) ensuring medication stored on the premises is in its original packaging and is labelled with the child's name and date of birth.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me.' (HSCS 1.19).

This area for improvement was made on 10 February 2022.

Action taken since then

The services administration of medication policy had been updated to take account of best practice. Medication currently used within the service was appropriately labelled and stored. Appropriate documentation was in place.

This area for improvement was found to have been met.

Previous area for improvement 2

To support children achieve and progress, the manager and staff should ensure daily routines are planned to meet children's needs and do not disrupt free play and exploration.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27).

This area for improvement was made on 10 February 2022.

Action taken since then

Staff had been supported to become more knowledgeable about best practice through training, reading and discussion and this helped them to support good outcomes for children.

Effective arrangements for the deployment of staff helped to ensure that children could access all areas of the nursery.

Routines were flexible, allowing children to make choices and direct their play. A rolling snack, for example, allowed children to access snack when it suited them, therefore, limited any disruption to their play.

This area for improvement was found to have been met.

Previous area for improvement 3

To fully engage children and support their progress, the manager should ensure staff have the skills and knowledge to motivate and extend children's thinking. This should include, but not be limited to, an understanding of current guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance, and best practice' (HSCS 4.11). This is to ensure staff skills and knowledge is consistent with the documents, including but not limited to, 'Draft Quality Framework for daycare of children, childminding, and school aged childcare' and 'Realising the Ambition'. These can be found at: • <https://hub.careinspectorate.com/media/4465/a-quality-framework-for-daycare-of-childrenchildminding-and-school-aged-childcare.pdf> • <https://education.gov.scot/improvement/learning-resources/realising-the-ambition/>

This area for improvement was made on 10 February 2022.

Action taken since then

Since the last inspection a number of new staff had been recruited and described a good quality induction. Training and activities had been undertaken by staff in relation to best practice guidance. We saw very good examples of staff using their knowledge and skills to motivate and extend children's thinking.

This area for improvement was found to have been met.

Previous area for improvement 4

To support improvement to the service and ensure good outcomes for children, the manager should ensure quality assurance systems are fully embedded into practice. This should include, but not be limited to: a) audits of medication; b) a safe environment; c) monitoring of staff practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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 10 February 2022.

Action taken since then

A range of systems were in place which supported a culture of continuous improvement. These included medication audits and auditing the environment to ensure that it was safe. There was clear evidence of action staff had taken to identify and then progress any issues that needed to be addressed.

Staff had received training in relation to best practice guidance including 'Realising the Ambition' and their practice had been monitored post training to ensure that they were applying their knowledge. We found staff practice to be of a very good quality.

This area for improvement was found to have 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?	5 - Very Good
1.1 Nurturing care and support	5 - Very 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?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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