

Little Monkeys Nursery Day Care of Children

28 Kilmaurs Road
Edinburgh
EH16 5DP

Telephone: 01316675544

Type of inspection:
Unannounced

Completed on:
10 February 2023

Service provided by:
Little Monkeys Limited

Service provider number:
SP2003002999

Service no:
CS2003012109

About the service

Little Monkeys Nursery is registered to provide a care service to a maximum of 60 children aged 3 months to entry to primary school age.

The premises is a large townhouse converted into nursery accommodation. Playrooms accommodate children in age groups across three floors with children under three years old on the lower ground and ground floor; and preschool on the first floor. A secure garden area provides opportunities for outdoor play each day for all children on a rotational basis.

The service is in the Prestonfield area of Edinburgh, and is close to local amenities.

About the inspection

This was an unannounced inspection which took place on Monday 6 February 2023 between 9:45 and 17:55. A second announced visit took place on Wednesday 8 February 2023 between 09:40 and 16:05. 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 many children using the service and 34 parents and carers through email, phone calls and in person
- spoke with the staff and management team
- observed practice and children's experiences
- reviewed documents
- spoke with a visiting professional who supported the service's forest programme.

Key messages

Children experienced warm, caring and nurturing support from staff who knew them well.

Positive relationships with families supported continuity of care and effective partnerships.

Children had positive play experiences, which allowed them to follow their own interests.

Children's play and learning was enhanced through connections to their local community, including regular forest sessions.

Quality assurance processes could be further developed to enhance continuous improvement.

Routines of the day and staff deployment during these times should be improved to ensure children have consistently positive experiences.

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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children.

1.1 Nurturing care and support

During play and interactions with staff, children were happy and settled. Staff gave reassurance and comfort that supported children's wellbeing. Staff knew children well, meaning they benefitted from positive, engaging relationships with consistent adults.

Children's mealtimes were unhurried, social experiences. Children's wellbeing and safety was promoted as most staff sat with children and engaged in conversations. Older children had some opportunities to develop their independence as they collected their own name tags and set their cutlery. There was further scope for all children to have more opportunities to develop skills through mealtimes. For example, the service could introduce some elements of self-service. This would promote children's choices and enable them to develop important life skills.

At times, the routines prior to lunches and snacks interrupted children's play. Options should be considered for continuing with routines whilst ensuring a variety of core experiences remain available for children. To ensure children's opportunities for play and learning are maximised, the service should review the pace and routine of the day to allow for more flexibility and choice. We have restated an area for improvement in relation to this aspect of children's care and support (see area for improvement 1).

The effective use of personal planning approaches enabled staff to respond quickly, sensitively, and compassionately to changes in a child's life. Ongoing communication with parents and carers enabled staff to be responsive to children's individual health and wellbeing needs. For example, children's preferences from home were followed. Staff used important information to promote consistency and provide continuity in care. For children who required additional support, staff were working proactively with children, families, and other professionals to identify appropriate strategies based on individual needs. This supported children to receive tailored support that was right for them.

Arrangements for medication had improved since the last inspection. However, there were some aspects of the management of medication that could be further developed. For example, some staff were unsure of specific medication for individual children and whether this was present. Staff knowledge should be regularly monitored to make sure they are confident and skilled in supporting children's health care needs. While some improvements had been made, we have restated a previous area for improvement to support consistency (see area for improvement 2).

1.3 Play and learning

Children were confident, happy, and having fun. They invited staff into their play, suggesting they knew staff would respond in a positive way. Staff made time for stories and songs with children. These experiences supported children's language and literacy development, while promoting positive relationships.

Planning approaches were responsive to children's interests. This enabled children to engage meaningfully

in play and learning experiences. Children with a particular interest in pirates had made masks and treasure maps. They were proud of their creations and talked enthusiastically about their ideas.

Floor books were used to capture and record children's participation in activities and experiences. Some individualised planning was taking place and staff were developing their skills in using observations to track and monitor children's learning and development. The provider had identified through self-evaluation that staff would benefit from further learning opportunities to enhance their skills in observing and tracking children's progress. This work should continue so that children experience play and learning that supports them to achieve their full potential.

Staff understanding of child development was progressing. Some staff used effective questions to extend and enhance children's learning. This enabled children to lead their own play and develop thinking skills. On a few occasions staff expectations did not meet with the development needs of children. For example, younger children's play was interrupted as adults asked them to stop moving sand from the tray to the table. Children were exploring processes and experimenting with movement, but the interruption stopped them from enjoying this experience. The provider had already begun work to support staff in developing their understanding of child development theory. To ensure children have consistently meaningful play experiences, this work should continue.

Core resources such as sand, water, painting, and mark making supported children to develop their literacy, numeracy, and creativity skills. Younger children enjoyed exploring stimulating sensory materials, such as rice trays and water-play. Some open-ended materials such as fabrics and tyres in the garden supported children to explore and experiment. The introduction of more loose parts and open-ended materials including real-life resources could further enhance children's play.

Children's opportunities for play and learning were enhanced through connections to the wider community. For example, older children had regular sessions in the forest, while all children spent time on local walks and outings. These experiences enabled children to learn about the world around them, manage risks and provided positive opportunities which enhanced children's wellbeing. Children told us they had fun at the woods. Parents valued the outdoor experiences and the work that went into providing these opportunities.

Areas for improvement

1. The service should further consider how best to maintain quality of experience for children, particularly around routines, and when planning for staff combinations.

This is to ensure that care and support is consistent with Health and Social Care Standards which state "I experience stability in my care and support from people who know my needs, choices and wishes, even if there is a change in the service or organisation (HSCS: 4.15)" and "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

2. The service should further consider the regular monitoring of children's medication processes to maintain their health and wellbeing. This would include but not be limited to, continually assessing staff knowledge and confidence and quality assuring the information recorded for children.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state "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 setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children.

2.2 High quality facilities

Children experienced a homely environment. One parent said, "over the time we have been there, the nursery have worked hard to update things and change spaces around to make best use of them". Rooms were bright and well-ventilated promoting children's wellbeing. Since the last inspection, some work had been undertaken to upgrade paintwork and refresh spaces. Cosy areas had been created in several of the playrooms. During the first inspection visit these areas were less well resourced. Improvements were made on the second visit, which meant children had more inviting spaces to relax.

A maintenance log helped the service to manage work needed and showed actions that had been taken to improve the environment. For example, work had been carried out on windows and gates. This work contributed to the environment remaining safe and secure. There were some outstanding issues that the service addressed during the inspection. To ensure children experience a consistently positive environment, ongoing quality assurance should continue in order to manage the general upkeep of spaces.

Overall, good infection, prevention and control measures were followed. Most parents commented positively on the environment describing it as clean and safe. Spaces were clean and free of debris. This contributed to children experiencing a comfortable and welcoming environment.

We highlighted how children's dignity and privacy could be better assured by improving the nappy changing facilities for older children. Swift action was taken to address this but the measures in place should be further reviewed to ensure they meet good practice guidance. While a curtain improved children's privacy, good practice would be to have a partitioned nappy changing area. Further work should be undertaken to address the environment, so it reflects current good practice. We signposted the service to guidance such as 'Space to Grow' (Scottish Government, 2017) and 'Nappy changing facilities for early learning and childcare services: information to support improvement' (Care Inspectorate, 2018) and we will continue to liaise with the provider on these matters.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children.

3.1 Quality assurance and improvement are led well

Communication with parents was effective and contributed to the development of the service. The introduction of a parents group provided an opportunity for them to share their views and feedback. Parents valued this engagement as it supported them to influence their children's experiences and care. One parent said, "We have been able to discuss different areas and feedback from ourselves and other parents, and hear about upcoming plans and be able to have input into these as well". This approach should be built upon further to support ongoing improvements. For example, some parents said they would like more access to the building on a day-to-day basis.

Self-evaluation was enabling the service to identify strengths and recognise areas of development. The staff and management team reflected well together using tools such as floorbooks and team meetings. Floorbooks showed the gradual improvements made by the service and demonstrated commitment from the management and staff team to enhancing outcomes for children. For example, staff had reviewed and improved some spaces, and through discussion were able to evidence their understanding of further developments needed to build on the progress.

An improvement plan reflected some key priorities and identified what the service could do to promote positive outcomes for children and families. For example, one priority was to provide more child-led experiences across the nursery. This showed an understanding of children's rights.

Quality assurance was implemented through various monitoring tools, such as observations of practice, checklists, walk rounds and staff discussions. Overall, this allowed the quality of the service to be monitored and improved. For example, in one playroom peer observations had highlighted a need for some staff to improve their daily handovers with parents. The management team and room leaders had plans in place to support staff with this area for development. Further embedding of effective quality assurance processes, should be implemented to support continuous improvement and developments in practice. For example, as identified in previous key questions, improved quality assurance was needed to address some outstanding issues with medication, staff practice and the environment.

How good is our staff team?

4 – Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children.

4.3 Staff deployment

Effective staff deployment supported children to be cared for by familiar adults who knew them well. This helped the development of secure attachments. Planned and unplanned absences were managed well. As a result, children received continuity of care.

Overall, parents were satisfied with the staffing arrangements and were happy with the care their children received. One parent said, "The staff are always extremely welcoming and demonstrate a deep understanding of, and fondness for our son".

Staff worked well together as a team and were flexible in their approach to the needs of the service. For example, staff requested others supported children if they identified a specific need but could not reach them or were with another child. This supported children to feel nurtured and valued.

Staff were available in sufficient numbers and children were effectively supervised and nurtured. However, on a few occasions particularly during key transition points such as lunch times, staff deployment could be improved. For example, one staff member took a group of eight children to wash their hands. This meant the children had to wait for an extended period, resulting in them becoming restless. To promote consistently positive experiences consideration needs to be given to the flow of the day and the planning of key transitions and routines. We have restated an area for improvement in key question 'How good is our care, play and learning?' in relation to considering and improving the routines of the day. This would include improving how staff are deployed during these times.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

In order to ensure the safety and welfare of children, the provider must ensure that staff are registered with the Scottish Social Services Council (SSSC).

By 31 August 2021, the provider must improve the management of staff professional registration within the service. In order to achieve this, the provider must adhere to the following:

- when starting employment, staff must register for their role within SSSC timescales
- staff must be aware of and renew their annual SSSC registration
- ensure that the manager implements a robust monitoring process to quality assure staff registration with the SSSC.

This is to ensure that care and support is consistent with Health and Social Care Standard 3.14 which states "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" and standard 4.24 which states "I am confident that people who support and care for me have been appropriately and safely recruited".

It is also to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(2011/210) - regulation 4: Welfare of users and regulation 9: Fitness of employees.

This requirement was made on 9 July 2021.

Action taken on previous requirement

Staff had been supported to understand the need to register with a relevant professional body. This was discussed at induction and checked via a quality assurance tracker, which the service had developed. The manager kept a record of when renewals were due and supported staff to fulfill their duties. For example, they were reminded to pay the fee.

We discussed the importance of ensuring a track is maintained on applications when they are submitted as one staff member was very close to the deadline for registration.

Met - within timescales

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

The service should further consider how best to maintain quality of experience for children, particularly around routines, when planning for staff combinations.

This is to ensure that care and support is consistent with Health and Social Care Standard 4.15 which states "I experience stability in my care and support from people who know my needs, choices and wishes, even if there is a change in the service or organisation" and standard 4.11 which states "I experience high quality care and support based on relevant evidence, guidance and best practice".

This area for improvement was made on 9 July 2021.

Action taken since then

Although some improvements had been made, for example overall, staff were deployed more effectively across the day, some aspects of the routines and planning for staffing still needed to improve.

We have restated this area for improvement at this inspection.

Previous area for improvement 2

The service should further consider the regular monitoring of children's medication processes to maintain their health and wellbeing.

This would ensure care and support is consistent with Health and Social Care Standard 4.19 which states "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes".

This area for improvement was made on 9 July 2021.

Action taken since then

Some improvements had been made in relation to the monitoring of medication. For example, the manager had implemented checks to ensure medication was present in the service and that it was stored correctly. However, there remained some gaps in staff knowledge and some inconsistencies in record keeping. For example, a flowchart in place for one child included a step/medication the child did not need or have. The manager was receptive to discussions in relation to further enhancing the monitoring of medication arrangements.

We have restated this area for improvement at this inspection.

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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