

# Craiglockhart After School Club Day Care of Children

Craiglockhart Primary School  
90 Ashley Terrace  
Edinburgh  
EH11 1RG

Telephone: 01313 379 214

**Type of inspection:**  
Unannounced

**Completed on:**  
17 July 2023

**Service provided by:**  
Craiglockhart After School Club

**Service provider number:**  
SP2003002895

**Service no:**  
CS2003011990

## About the service

Craiglockhart After School Club is situated within Craiglockhart Primary School. The service has access to a number of rooms across the school building. The service also has access to the school playground. Local amenities such as parks, shops and public transport are nearby.

During the inspection, children attended the service for full days as it was during the school holiday period.

The conditions of registration state:

The care service shall be provided to a maximum of 112 children at any one time of primary school age.

During school holidays care may be provided from Craiglockhart Primary School, 90 Ashley Terrace, EH11 1RG to a maximum of 56 children at any time.

## About the inspection

This was an unannounced inspection which took place on Tuesday 11 July 2023 between 10:30 and 17:45. The inspection continued on Wednesday 12 July 2023 between 9.30 and 18:00. Feedback was provided to the manager and provider on Monday 17 July 2023.

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
- received written and verbal feedback from 15 parents
- spoke with eight staff and the management team
- observed practice and daily life
- reviewed documents.

## Key messages

Children were settled and enjoyed socialising with friends.

Children had good play and learning opportunities that enabled them to have fun and learn new skills.

Staff interactions were warm and supportive.

To ensure children have regular opportunities to rest and relax, the service should continue to develop the environment.

To support ongoing improvements, the service should continue to develop quality assurance processes and improvement planning including the use of self-evaluation to ensure children and families experience outcomes that are as positive as possible.

## 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 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's experiences.

### Quality indicator 1.1: Nurturing care and support

Children had developed positive relationships with each other and staff. As a result, they were happy, relaxed, and content. Overall, children experienced positive interactions from staff that created a friendly and supportive atmosphere in the service. One parent said, "They are friendly, approachable, and have built great relationships with my child".

Staff had fun with children and were readily available to offer help and guidance. Staff talked children through their daily experiences helping them to make decisions about how they spent their time. Although children had opportunities to influence the pace and routines of the day, on a few occasions children were brought together in large groups to listen to instructions. This practice sometimes interrupted the flow of the day, and some children became restless. To ensure all interactions are as child-led as possible, staff practice in relation to providing instructions and directing children should be reviewed.

Mealtimes were safe as staff were available to supervise and support children. Children's dietary requirements were well considered and planned for based on individual needs. This helped maintain children's health and wellbeing. The service had started to introduce self-serve snacks. This practice was providing children with opportunities to be independent and develop life skills. Overall, children had positive mealtime experiences that promoted their wellbeing.

Overall, the snacks provided were healthy and varied. However, a few parents said that they felt the snack menu could be healthier. At times, children had diluting juice instead of milk or water. This meant for these children they were having a drink with a higher sugar content. To ensure parents feel included in their children's food choices the service could consider ways to gather feedback from parents and children to help inform menu planning.

Where children required additional support their needs were clearly identified and known by the staff team. Planned strategies were in place to help ensure children were included and respected. Staff were sensitive to children's changing needs and responded with compassion. This helped to ensure children's rights were respected.

### Quality indicator 1.3: Play and learning

A good balance of planned and responsive experiences meant children were engaged in meaningful play of their choice. Experiences such as arts and crafts, reading, small world play and role-play supported children to explore their own ideas and be creative. Children enjoyed learning new skills as they took part in activities such as comic book writing and sewing. One child proudly showed us a vest they had made. Through these activities children were experiencing a sense of achievement and having fun.

Children had good opportunities to be active including lots of outdoor play and access to a good-sized gym hall for physical games and sports. These experiences supported children's health and encouraged them to

have fun with their peers.

Access to loose parts materials in the playground area supported children's creativity and gave them opportunities to work together. For example, some children used cones, crates, and other items to create a role-play game. Children were having fun together as they played. To further support children's creativity, the service should consider the introduction of more open-ended play materials within the indoor environments. For example, they could add open-ended items to support construction and role-play as many indoor items were one purpose, plastic resources.

Staff joined in with children's play in a respectful way taking account of children's rights and demonstrating a genuine interest in their ideas. For example, some children had developed a café scenario where they had fun serving a staff member. This play resulted in lots of laughter and supported the development of positive relationships.

Staff used observations of play and discussions with children to plan play and learning opportunities. For example, children decided what games they wanted to play in the gym hall and these suggestions were taken forward by staff. This resulted in children enjoying experiences that reflected their interests.

Some staff had undertaken training that had helped them to recognise play types. This resulted in them understanding how to introduce resources and use interactions to extend and support children's play. Good progress had been made in relation to supporting children's play. To build on this, the service should continue to develop the quality of resources and staff practice to further enhance and support children's play. For example, they could use environment audits to help ensure the range of resources remained interesting. Also, the staff and management team could consider the routines of the day to ensure they do not interrupt children's play unnecessarily.

## 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's experiences.

### Quality indicator: 2.2 Children experience high-quality facilities

Children experienced a spacious, well-ventilated environment. The large outdoor playground encouraged children to be active and enjoy time in the fresh air. Indoors, designated areas for play and eating promoted children's comfort and supported engagement. However, to maximise children's right to rest and relaxation the service should further improve the environment to include comfortable, homely spaces. Soft mats and cushions were available in one room, but they were often placed in the middle of the space. This resulted in children who wanted to relax being disturbed by the play going on around them. During the inspection, staff added a designated rest space to the back of the main hall. This area included additional cushions and was positioned in a quieter area of the hall.

Effective systems such as registers and noticeboards were used to manage children's movements within the service. Staff were observed to do regular headcounts meaning they were alert to how many children were present. This promoted children's safety and wellbeing. Children were given freedom to move around the space allowing them to make choices about how and where they spent time. On a few occasions children were unsupervised in communal areas such as cloakrooms or corridors. To further minimise the potential risk of children leaving the service, the staff and management team should review these periods of the day

and develop procedures that support children's overall supervision.

Trips and outings were safe and well managed. For example, during an outing to the local park staff were positioned effectively across the group meaning they could safely manage the road crossing. On arrival, children and staff discussed the agreed boundaries to ensure everyone was clear on where they could safely play. This helped children to be involved in managing their own safety, while allowing staff to be clear on their role.

Consistent cleaning practices meant children's health and wellbeing was respected and protected. Toilets and handwashing facilities were clean and well stocked with appropriate materials such as soap and paper hand towels. Overall, children experienced a clean and well-maintained environment that supported their wellbeing.

Overall, staff and children followed good hand hygiene. For example, children washed their hands before eating and after using the toilet. However, on a few occasions staff missed opportunities to remind children to wash their hands. For example, after eating and on one occasion before a child began to eat. To ensure children's health and wellbeing is continually prioritised staff should be supported to revisit best practice guidance and support children to follow effective hand washing at all times.

## How good is our leadership?

## 3 – Adequate

We evaluated this theme as adequate. Whilst strengths had a positive impact on children, key areas should be improved.

### Quality indicator 3.1: Quality assurance and improvement are well led

Children were consulted daily about their experiences and the activities they were involved in. The service had developed a keyworker system that enabled children to share individual feedback with an identified adult. Surveys and noticeboards also encouraged children to express their ideas and make suggestions. One child told us, "We can suggest trips and activities in holiday club. They usually listen to us." This demonstrated how children's views were listened to and acted upon.

Most children said they enjoyed attending the service and found the activities fun. During the inspection, some children shared what they thought the service could do better. For example, some said they felt during term-time the activities could be more varied. Most parents were happy with the service provided and shared this with us through feedback. One parent said, "I am very happy with the service." However, a few parents felt improvements could be made to staff interactions, communication and the experiences for children. To ensure all stakeholders are empowered to influence the quality of the service, the provider should ensure ongoing feedback is gathered and acted upon.

The management team and provider had focused on creating a positive culture that supported improvement. Team meetings and support sessions including staff appraisals were beginning to support the development of a shared vision across the staff team. These sessions enabled staff to reflect on their work and practice. This resulted in staff having a greater understanding of how they could support children's play. For example, one staff member told us they were now more confident in recognising play types and explained how this had helped them consider their interactions with children during their play. Moving forward the service should now further develop the approach to improvement planning and self-evaluation. The service should use best practice documents and feedback from children, staff, and parents to support

ongoing developments. This is to aid a culture of continuous improvement and help the service to assess the quality of the service against good practice.

Quality assurance systems were still in the early stages of being developed. For example, monitoring observations and feedback to staff about the quality of play and learning had resulted in improved staff interactions. However, some gaps remained in the quality of the service. For example, during the inspection there were some inconsistencies in the quality of handwashing and some further improvements were needed to the environment to maximise children's wellbeing. To ensure consistently positive outcomes for children, quality assurance processes should be further developed and embedded to ensure all aspects of practice are effectively monitored. We have continued an area for improvement in relation to this. To ensure quality assurance, we signposted the management team and provider to the Care Inspectorate Hub where information about quality assurance can be found.

### Areas for improvement

1. The provider should ensure that quality assurance processes are developed and implemented. These should be evidenced based, identify areas for improvements and have clear plans to develop the service and improve outcomes for children.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that '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 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's experiences.

#### Quality indicator: 4.3 Staff deployment

The service was appropriately staffed across the day, helping to support children's safety and wellbeing. Staff absences were well planned for. A detailed rota allowed the management team to identify gaps ahead of time and make appropriate staffing provision for the care and welfare of children.

Staff were proactive in checking in on children and supporting their wellbeing. For example, a staff member noticed when a child was becoming upset and provided comfort and support. The management team worked flexibly to provide cover where needed and to ensure children's wellbeing needs were met.

Staff used effective communication strategies to ensure they were aware of children's individual needs. This included, taking part in regular team meetings and recording important information that was shared daily with the whole team. The service ran all year round and many of the staff present during the inspection only worked during the school holidays. This meant staff relied heavily on the knowledge of a few staff who worked all year round. These staff communicated well with newer staff and provided support. There were systems in place to ensure holiday cover staff got to know children and understand their needs. For example, staff were given time to review children's personal plans. The provider and management team discussed their plans to continue to review the staffing model in relation to the school holiday periods. Ongoing staffing reviews should be undertaken to ensure there is enough qualified and consistent staff

available to all children all year round. We agreed further monitoring of staff deployment would be useful to ensure the planning and management of staffing remained effective.

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

### Requirements

#### Requirement 1

By 06 May 2022, the provider must ensure that children's health, welfare and safety needs are met. The provider must ensure that sufficient information is gathered and recorded about all children as part of their personal plan, clearly setting out their individual needs and how these will be met. This will ensure staff plan children's care based on up to date and reliable information.

To do this, the provider must, at a minimum:

- a) record sufficient information about children in order to meet their individual care and support needs.
- b) ensure that procedures are in place to enable effective communication and information sharing with staff so that they know children's needs and how to provide consistent care and support.
- c) ensure planned review dates are carried out at least once every six months in consultation with parents or sooner if a child's support needs change.

This is to comply with Regulation 5(1)(2) (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

**This requirement was restated to 31 March 2023.**

**This requirement was made on 6 May 2022.**

#### Action taken on previous requirement

Personal plans were developing well and as a result children's needs were being effectively met. Staff knew children well and there were systems in place to help new staff to understand children's needs and preferences.

Individual health care plans were clear and detailed, ensuring staff had the information required to support and respect children's health needs. Overall, where children had specific preferences or needed additional support effective personal plans were in place. This enabled the service to implement the care and support children needed to secure their health and wellbeing.

Although, this requirement relating to personal plans was assessed as met, to ensure all children receive care and support that is consistent and effective quality assurance relating to personal plans needed to be

embedded. For example, for one child there was limited information recorded in their personal plan, including gaps in the registration information. The service took swift action to address this during the inspection. While staff knew this child's needs, the lack of recording had the potential for newer staff to be less informed. Also, the lack of recording did not support the service to evaluate the quality of the support in place for the child. Reviews of personal plans were taking place with parents but the service could further develop the recording of reviews to ensure each plan remained accurate and up to date. For example, for one child it was not clear when the review had taken place as it was not signed and dated. To support ongoing improvement, we have continued an area for improvement relating to quality assurance within Key Question: 'How good is our leadership?'

#### 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 provider should ensure that quality assurance processes are developed and implemented. These should be evidenced based, identify areas for improvements and have clear plans to develop the service and improve outcomes for children.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state 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 8 April 2022.**

#### Action taken since then

Quality assurance processes were being developed but further work was needed to ensure these were effectively implemented to support improvement.

**This area for improvement has been restated as part of this inspection.**

#### Previous area for improvement 2

The provider should improve how staff interact with and support children's play, learning and development. This should include, at a minimum, enhancing staff skills and knowledge in providing a well presented and well resourced play environment which provides choice and challenge for children.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that 'As a child, my social and physical skills, confidence, self-esteem and creativity are developed through a balance of organised and freely chosen extended play, including using open ended and natural materials' (HSCS 1.31).

**This area for improvement was made on 8 April 2022.**

# Inspection report

## Action taken since then

Staff practice and interactions had improved. As a result, children were experiencing more choice and challenge in their play. While some further improvements could be made to the quality of resources and environment inspection evidence showed that overall all the play environment was supportive of children and their interests.

Staff interactions were supportive and many staff had developed an improved understanding of how to engage with children and support their play and learning. For example, staff now planned experiences that supported children to learn new skills. Also, some staff were more aware of children's play types. This enabled them to explore how they could enhance children's play through their interactions and extensions, such as adding resources or making suggestions.

Overall, children had positive play and learning experiences during their time at the service.

**This area of 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](http://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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