

# Rephad Nursery Day Care of Children

Rephad Primary School  
Cairnport Road  
Stranraer  
DG9 8BQ

Telephone: 01776 704 195

**Type of inspection:**  
Announced

**Completed on:**  
12 December 2023

**Service provided by:**  
Dumfries & Galloway Council

**Service provider number:**  
SP2003003501

**Service no:**  
CS2003015537

## About the service

Rephad Nursery is located within the grounds of Rephad Primary School in Stranraer. The service is registered to provide a care service to a maximum of 100 children, not yet of an age to attend primary school at any one time. Of those, no more than 20 are aged 2 to under 3 years.

## About the inspection

This was an announced shared inspection along with Education Scotland which took place on Monday 11 December 2023 and Tuesday 12 December 2023. The inspection was carried out by two early learning and childcare inspectors from the Care Inspectorate and two inspectors from Education Scotland.

To prepare for the inspection we reviewed information about this service. This included, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with and observed children using the service
- contacted families and staff to gather their views
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- Most children were happy and accessing play and learning opportunities on offer.
- The service was welcoming, bright and well ventilated.
- Management and staff were open and honest in relation to the journey they had been on over the past six months.
- We found that throughout the service children's needs were not consistently met.
- Staff felt there had been times where their voice had not been heard, senior management and the local authority should continue to provide support.
- The approach to staffing within the service continues to be a challenge and is not always outcome focused for children.
- A whole team approach is required to ensure that any improvements are fully implemented and sustained.
- To support children's play and learning, staff should continue to develop their knowledge and understanding of child development, relevant theory, and practice.

## 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?	2 - Weak
How good is our setting?	3 - Adequate
How good is our leadership?	2 - Weak
How good is our staff team?	2 - Weak

Further details on the particular areas inspected are provided at the end of this report.

## How good is our care, play and learning?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

### **Quality Indicator - 1.1 - Nurturing care & support.**

Most children were happy, settled and confidently accessing all areas of the nursery. Staff were warm and welcoming, and we observed some staff responding to children's individual needs. Some children approached staff when needing help or support. This showed us that children were developing trust with staff.

At the last inspection, we highlighted the positive impact the 2-3-year-old room was having on outcomes for children. However, since the last inspection in March 2023, the service made the decision to open the nursery to a free flow system for all children attending. We found during inspection that this decision was not having a positive impact especially for the younger children and children requiring additional support. We discussed the rationale surrounding this decision and have asked the provider and manager along with the staff team, to review the layout with a focus on positive outcomes for children while considering individual children's health, wellbeing and safety needs, resources, and staff deployment. This should also be in consultation with parents to ensure the service is delivering best outcomes for all children.

We found that throughout the service children's needs were not consistently met. There were several occasions when staff missed cues from children who were seeking support. Personal planning information had been developed and reviewed following the last inspection, support strategies and some next steps had been documented. However, these need to be streamlined and strategies required to support children need to be implemented, along with next steps that are meaningful and tracked, to support children's individual health wellbeing and safety needs as well as play and learning. As a result, children did not always receive the correct care and support to meet their individual needs or support them to develop. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1)

Meals times had been developed to support children to have a rolling snack and lunch, this was enabling children to choose when they wanted to eat and was having less impact on interrupting children's play and learning. Children were developing some independence and self-help skills through getting their own drinks, collecting, and choosing their lunch and clearing away their dishes. However, we observed staff to be task focused and there was little communication to support children's individual needs, resulting in several children being missed who required help or support at lunch time. The lunchtime experience requires to be developed with a focus on a more nurturing approach. This will support all children to have a positive experience through staff supporting and encouraging children while modelling good eating habits and developing conversations.

### **Quality Indicator - 1.3 - Play & Learning.**

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Most children were happy and accessing play and learning opportunities on offer. Staff had developed some areas of interest to begin to develop children's imagination.

The home corner area was popular with the children, we observed them dressing up and pretending to make cups of tea and soup with loose parts resources. The block area had been improved to allow more children

to play and learn. We recognise management and staff had developed some areas of the environment. However, staff need to be delivering better quality of experiences that are developmentally appropriate and inspire children's curiosity and imagination, enabling them to engage in more purposeful play and learning.

At the last inspection, we discussed developing the experiences and opportunities to support children's play and learning through improving planning and providing resources, and opportunities that enhance children's curiosity, sense of wonder and fun. During the inspection, we found experiences on offer to all children to be limited and needed to be improved. Staff also need to consider the age and stage of the younger children to ensure they are supporting and developing their schematic play. For example moving objects by throwing, rolling, or dropping, developing interests in things that turn, like taps, twirling objects or their body. There were limited opportunities available, and staff were discouraging children from carrying or moving objects around and playing in the water at the sink, as there was not enough water in the water tray. We found this has resulted in poorer outcomes for children especially the 2-year-old children.

Planning is currently being completed by the manager and learning is being documented by staff within the evaluation sheets, evidence is then documented within the big books and children's individual personal learning profiles. Moving forward, consideration should be given to how individualisation is captured within planning. In addition, planning should be linked to observations in children's journals where meaningful, next steps should be recorded. Management needs to further involve staff in the planning process and delivery of experiences.

To support children's play and learning staff should continue to develop their knowledge and understanding of child development, relevant theory, and practice. Staff need to build as team on their experience and expertise to fully meet children's needs through high quality interactions. Management should continue to monitor staff interactions to ensure they are extending children's thinking and widening their skills, which will support children in developing and leading in their play and learning. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 2)

## Areas for improvement

1. To support children's health, welfare and safety needs management and staff should ensure, information gathered within children's personal plans is used appropriately to support children's individual needs. This includes support strategies for children who require them.

This is to ensure that care and support is consistent with the 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'. (HSAC 1.15); and 'My care and support meets my needs and is right for me' (HSCS 1.19).

2. The manager should continue to develop their approaches to child-led planning, to support children to achieve their potential by ensuring appropriate levels of challenge and depth in play and learning. Consideration should be given to how individualisation is captured within planning. In addition, planning should be closely linked to observations in children's journals where meaningful next steps should be recorded. These should be monitored to ensure consistent quality of written observations.

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); and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

## How good is our setting?

### 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

#### **Quality Indicator - 2.2 Children's experience high quality facilities.**

The service was welcoming, bright and well ventilated. There was a secure entry system in place which was monitored by staff. Through support from the local authority management and staff had continued to work on the environment developing areas inside. Some of the children's artwork and photographs of experiences were displayed which celebrated their achievements and offered opportunities for children to recall and reflect. Several cosy areas had been developed to enable children to rest and relax while having a story, or to have time out from the main play space. For example, we observed children relaxing with staff on the sofa to have a story and accessing the quiet area giving children time to reflect. Management and staff should continue their journey in reviewing and evaluating play spaces which will support children's engagement and sense of wonder.

Children had free flow access to outdoors, staff were using radios to communicate with each other to support in tracking children's movements and if they needed support. Gates outside were secure at all times and the service now only uses one door out to the play area which was supporting them to know who was accessing the outdoor area. The service is currently looking at developing the garden and have begun to gather ideas. We would encourage management and staff to involve the children and parents in developing this area with a view to enhancing children's play and learning.

Staff maintained areas to support a safe environment, and children were encouraged to wash hands prior to having lunch. Toilets were maintained throughout the session and staff were observed to be following and implementing appropriate infection, prevention and control practice which was supporting a safe environment.

We sampled accident and incident records and found these were being shared with parents. At the last inspection we made an area for improvement and asked management to audit these to identify common or reoccurring concerns. This was to include any actions in relation to the environment, resources, and individual children to identify any common patterns, and appropriate action should be taken where required. We found management have developed an audit tool which is supporting the service to keep children safe.

In developing the environment further, we would ask management and staff to consider having the main lights off during the day, to create a more calming environment for children to play and learn. Also, to reduce the risk of infection we would ask that children are encouraged to wash hands on returning from outdoors and monitor cleanliness of tables during lunchtime.

## How good is our leadership?

### 2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

#### **Quality Indicator - 3.1 Quality assurance and improvement are led well.**

Management and staff were open and honest in relation to the journey they had been on over the past six months. Management had developed an action plan following the last inspection and had received support from the local authority. However, management and staff told us staffing changes within the service continued to be a challenge, resulting in them being in the initial stages of making sustained improvements, and developing as a team to deliver best outcomes for children.

At the last inspection, we made a requirement in relation to safeguarding procedures to ensure children were fully protected. The management team and the provider have actioned the concerns we raised through carrying out an audit of safeguarding procedures, contacting appropriate services, updating staff training, and implementing clear processes and procedures. Through discussions with management and staff we are confident this requirement has been met. We would ask the provider to continue to support management and staff, ensuring annual training is carried out for all staff in the service.

Staff and management are meeting on a regular basis and use this time to reflect as a team on what is working well and what needs to change. However, these reflections are not always influencing positive change to outcomes for children and families. Staff felt there had been times where their voice had not been heard and further support is required from senior management and the local authority. We discussed with management and the provider concerns raised by staff and how further support was required to support the service to move forward. We discussed if changes are to be made then to have a consultation process with staff and where required involve parents. We suggested using the plan, do, study, act, model of improvement (PDSA) which will support the service to deliver changes that includes children's individual needs, interests and developmental stages. This will support staff to deliver and sustain better outcomes for children.

Management along with support from the local authority had developed some self-evaluation and quality assurance processes. We found these were still in the initial stages of showing any sustained improvement and there were gaps within the areas covered by the quality assurance systems in place. Management and staff must be accountable to ensure that self-evaluation leads to high quality care, which is tailored to the needs of children and families. Improvements made must be sustained to ensure continuity of wellbeing, care and learning for all.

At the last inspection we recommended that the service further developed quality assurance systems to have clear priorities, which were focussed on improved outcomes for children. Where there is evidence of monitoring and evaluation being carried out, we are not seeing the impact or progress of actions that are being identified, for example monitoring and evaluating the impact of staff practice and engagement. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1)

Revisiting the visions and values of the service would be beneficial. It would allow staff, parents, and children to gain a collective understanding, purpose, and commitment to their service. The provider, management and staff must recognise the key role they play in making improvements. A whole team approach is required to ensure that any improvements are fully implemented and sustained.

### Areas for improvement

1. The management team should further develop and implement systems for monitoring and evaluating the impact of staff practice. Robust quality assurance systems should continue to be developed to support the service and improve outcomes for children. In order to achieve this the management team should:

- a) ensure monitoring of staff practice and the implementation of organisational policies and procedures are carried out frequently, and purposeful feedback is provided to support staff to make and sustain improvements
- b) consult with and involve all stakeholders including staff, children, and parents in self-evaluation processes.

This is to ensure that management and leadership is consistent with the 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?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

### Quality Indicator - 4.3 Staff deployment.

Staff engaged well during the inspection process and were open and honest in relation to what had improved, following the last inspection and what still needs to be improved.

Staff were working flexibly across the service on a rota system to ensure appropriate staffing levels throughout the day. However, the approach to staffing within the service continues to be a challenge and was not always outcome focused for children. At points across the day staff were task focused leading to children not always having positive outcomes or experiences, resulting in limited opportunities for children to develop and learn at an appropriate pace or give them the required support they needed.

The provider and senior management acknowledge there have been challenges in securing consistent staff. Moving forward, effective deployment of staff should support consistent care, children's wellbeing, and resilience, resulting in children having positive experiences, better quality of interactions and improved play and learning outcomes. A whole team approach is required to ensure that any improvements are fully implemented and sustained. To improve the continuity of care, play and learning for children and to support staff deployment and morale, we would ask the provider to review the current system in place to support staff absences, individual children, and the consistency of the staff team. This was an area for improvement at the last inspection and will be repeated. (See area for improvement 1)

The staff team continued to engage in a range of professional learning opportunities to improve their practice. All the staff have undertaken an update in child protection training and were confident in reporting and recording any concerns. The level of knowledge, skills and experience was mixed throughout the setting, resulting in some inconsistent outcomes for children.

Staff now need to build as a team on their experience and expertise to fully meet children's needs through high quality interactions. Staff would benefit from giving children opportunities to develop their play through their interests and providing experiences that inspire children to engage and learn.

We discussed staff visiting and engaging with other establishments to build on their knowledge and experience supporting them in delivering better outcomes for children.

### Areas for improvement

1. To ensure children are safe and always receive high quality experiences, the provider and manager should, as a minimum review and make appropriate changes to staff deployment to improve experiences for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: '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' (HSCS 3.14).



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

### Requirements

#### Requirement 1

By 30 June 2023, the provider must ensure children are safeguarded and protected from harm. To do this, the provider must, at a minimum:

- a) Ensure any children identified with safeguarding concerns are referred to relevant agencies.
- b) Ensure an audit of safeguarding procedures are carried out within the service.
- c) Ensure the manager and staff have the required skills and knowledge in relation to recognising and responding to child protection concerns.
- d) Ensure the manager and staff are competent and knowledgeable about national, local, and the service's own child protection procedures and 'Getting it Right for Every Child'. (GIRFEC)

This is to comply with Regulation 4(1)(a) (Welfare of users); Regulation 7(2)(c) (Fitness of managers); and Regulation 9(2)(b) (Fitness of employees) 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 the Health and Social Care Standards (HSCS), which state that:

'I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20); and

'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies'. (HSCS 3.25).

**This requirement was made on 20 March 2023.**

#### Action taken on previous requirement

The management team and the provider have actioned the concerns we raised through carrying out an audit of safeguarding procedures, contacting appropriate services, updating staff training, and implementing clear processes and procedures.

Through discussions with management and staff we are confident this requirement has been met. We would ask the provider to continue to support management and staff ensuring annual training is carried out for all staff in the service.

**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

To support children's health, welfare and safety needs management and staff should ensure information gathered within children's personal plans is used appropriately to support children's individual needs. This includes support strategies for children who require them.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which states 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'. (HSAC 1.15); and  
'My care and support meets my needs and is right for me'. (HSCS 1.19)

**This area for improvement was made on 20 March 2023.**

#### Action taken since then

Personal planning information had been developed and reviewed following the last inspection, support strategies and some next steps had been documented. However, these need to be streamlined and strategies required, to support children need to be implemented along with next steps that are meaningful and tracked, to support children's individual health, wellbeing and safety needs as well as play and learning.

This area for improvement has not been met and has been repeated under quality indicator 1.1.

#### Previous area for improvement 2

The manager should continue to develop their approaches to child-led planning to support children to achieve their potential by ensuring appropriate levels of challenge and depth in play and learning. Consideration should be given to how individualisation is captured within planning. In addition, planning should be closely linked to observations in children's journals where meaningful next steps should be recorded. These should be monitored to ensure consistent quality of written observations.

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

'My care and support meets my needs and is right for me' (HSCS 1.19); and  
'I experience high quality care and support based on relevant evidence, guidance and best practice'. (HSCS 4.11)

**This area for improvement was made on 20 March 2023.**

#### Action taken since then

We sampled planning and observations of children's learning and found staff need to continue to develop their knowledge and understanding of child development, relevant theory, and practice. Staff need to build

as a team on their experience and expertise to fully meet children's needs through high quality interactions. Management should continue to monitor staff interactions to ensure they are extending children's thinking and widening their skills, which will support children in developing and leading in their play and learning.

This area for improvement has not been met and will be repeated under quality indicator 1.3.

### Previous area for improvement 3

To ensure children's safety management should implement an audit tool for accidents and incidents that occur within the setting. This should include any actions in relation to the environment, resources, and individual children to identify any common patterns, appropriate action should be taken where required.

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

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty'. (HSCS 3.18); and

'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies'. (HSCS 3.25)

**This area for improvement was made on 20 March 2023.**

#### Action taken since then

We sampled accident and incident records and found these were being shared with parents. Management have developed an audit tool to identify common or reoccurring concerns. This includes any actions in relation to the environment, resources, and individual children to identify any common patterns, and appropriate action is being taken where required.

This area for improvement has been met.

### Previous area for improvement 4

The management team should further develop and implement systems for monitoring and evaluating the impact of staff practice. Robust quality assurance systems should continue to be developed to support the service and improve outcomes for children. In order to achieve this the management team should:

- a) Ensure monitoring of staff practice and the implementation of organisational policies and procedures are carried out frequently, and purposeful feedback is provided to support staff to make and sustain improvements.
- b) Consult with and involve all stakeholders including staff, children, and parents in self-evaluation processes.

This is to ensure that management and leadership 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 20 March 2023.**

## Action taken since then

Where there is evidence of monitoring and evaluation being carried out, we are not seeing the impact or progress of actions that are being identified. For example, monitoring and evaluating the impact of staff practice and engagement.

This was an area for improvement at the last inspection and will be repeated under quality indicator 3.1.

## Previous area for improvement 5

To ensure children are safe and always receive high quality experiences, the provider and manager should, as a minimum review and make appropriate changes to staff deployment to improve experiences for children.

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

'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'. (HSCS 3.14)

**This area for improvement was made on 20 March 2023.**

## Action taken since then

The approach to staffing within the service continuous to be a challenge and is not always outcome focused for children. At points across the day staff were task focused, leading to children not always having positive outcomes or experiences, resulting in limited opportunities for children to develop and learn at an appropriate pace or give them the required support they needed.

This area for improvement has not been met and will be repeated under quality indicator 4.3.

## 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?	2 - Weak
1.1 Nurturing care and support	2 - Weak
1.3 Play and learning	3 - Adequate
How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate
How good is our leadership?	2 - Weak
3.1 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	2 - Weak
4.3 Staff deployment	2 - Weak

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