

Leith St Andrew`s Playgroup Day Care of Children

Leith St Andrew`s Church
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Type of inspection:
Unannounced

Completed on:
22 May 2025

Service provided by:
Committee Of Leith St Andrews
Playgroup

Service provider number:
SP2003003156

Service no:
CS2003013388

About the service

Leith St Andrew's Playgroup is registered to provide an early learning and childcare service to 24 children at any one time aged between 2 years and primary school entry.

The service is provided from St Andrews Church in the Leith area of Edinburgh and offers funded childcare. The service makes use of the main hall, toilets and has access to the church itself and two smaller rooms. They also have access to a kitchen, and an outdoor play space directly accessed from the main playroom.

The service benefits from good transport links, nearby parks and amenities. The children benefit from regular trips to parks throughout the week for a variety of play and learning experiences, as well as an allotment area for planting on a more ad-hoc basis.

About the inspection

This was an unannounced inspection which took place on Wednesday 14 May 2025 between the hours of 9:15 and 15:00 and Thursday 15 May between 08:45 and 12:15. The inspection was carried out by one inspector 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 children using the service and received online feedback from 10 families
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

As part of this inspection, we undertook a focus area. We have gathered specific information to help us understand more about how services support children's safety, wellbeing and engagement in their play and learning. This included reviewing the following aspects:

- staff deployment
- safety of the physical environment, indoors and outdoors
- the quality of personal plans and how well children's needs are being met
- children's engagement with the experiences provided in their setting.

This information will be anonymised and analysed to help inform our future work with services.

Key messages

- Children were settled, happy and engaged in play.
- Staff were warm and nurturing and responsive to children's cues.
- Personal plans were completed in partnership with parents which ensured that children's supports were tailored to their individual needs.
- Daily access to fresh air and outdoor experiences supported children's health and wellbeing.
- Quality assurance systems should continue to be developed, to ensure they are robust and effective, to maintain a safe environment to influence ongoing improvements.
- Children benefitted from a range of experiences within their local community enhancing their connections to their local area.

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 evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children experienced warm and nurturing care from staff who were responsive in their approach. Close relationships between children and staff had been developed which helped children feel included and safe. Parents all strongly agreed or agreed with the statement 'Overall, I am happy with the care and support my child receives in this service'. Comments we received included, "The service has a lovely community feel" and "My (child) is thriving in the environment".

Children's wellbeing was effectively supported through personal planning. Key information was gathered in partnership with parents and was used to provide individual care for children. Staff were knowledgeable about each child's needs and strategies in place to support them. For example, health needs, dietary requirements, and children's interests. The service consulted well with families, and other professionals where appropriate, to identify strategies for children. These included the use of object signifiers and singalong to support children's communication.

Staff were kind and caring in their interactions when supporting children with personal care. Children's permission was sought before personal care was carried out. This meant that children's privacy was respected, and their play was not disrupted whilst ensuring their care needs were met.

Since the previous inspection medication procedures had been improved. Children had individual medication boxes, easily identified with their details and photograph. All health needs, dosage and stepped approach were easily accessible for each child. Staff had a good understanding of children's health needs and were clear of current medication guidance in keeping children safe.

Staff had completed child protection training and demonstrated a good understanding of the processes and procedures they would follow if they had any concerns about children's wellbeing. Staff understood their role and responsibilities in keeping children safe.

Mealtimes supported children to be independent, learning how to serve their own food and clearing away dishes. Staff were aware of children's dietary requirements and preferences and these were catered for. Snack times were relaxed and sociable and staff sat with children encouraging conversations and ensuring their safety. Rolling lunch had recently been introduced, however, was not as relaxed as snack times. This could be further enhanced to ensure a consistent, positive mealtime experience for all children.

Quality indicator 1.3: Play and learning

Children were happy, confident, and had fun, developing skills, sharing, and negotiating with each other. They benefitted from a range of play experiences and activities that supported their development and interests. This enabled them to lead their own play. These included building bricks, art and crafts and transport toys. One child told us they enjoyed, "Making potions with my friends in the garden".

Staff showed enthusiasm in their interactions with children and showed that their play experiences and

ideas were valued. Staff should continue to develop their skills and confidence in extending children's learning. This should include effective questioning techniques to promote deeper thinking during play. This would help support sustained and meaningful play, providing challenge and extended learning.

Literacy and numeracy opportunities were provided through routines of the day. For example, storytelling and songs. Children could look at books and shared stories with staff throughout the day. We saw children making dough, which was facilitated by staff who encouraged counting and measuring of ingredients. We suggested the use of recipe cards to enhance children's experiences, independence, and use of environmental print.

Learning and development was monitored and tracked to establish children's individual progress and to identify next steps. Learning journals were in place and contained observations and photographs. These demonstrated learning experiences which captured achievements and progress. These could be further developed to improve the quality and regularity of observations to capture learning. Parents gave positive responses to the use of the learning journals "The updates and pictures that the staff post in the online learning Journal are incredibly valuable and insightful" and "Learning journals show (child) does so much from science experiments, stories, dancing, trips and outings".

The service had made good use of the local community, using local parks, the library and shopping trips to the local supermarket. This helped children to learn about their local area, build new skills, and develop a respect for nature.

How good is our setting?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience quality facilities

Children and families benefitted from a warm and welcoming environment. There was plenty of natural light and ventilation to support children's wellbeing. The entrance area was a welcoming space to meet parents and there was a range of information available. Parents told us, "It's a welcoming, caring, nurturing environment" and "It's such a warm, welcoming setting, home from home I'd say".

Children's safety was maintained. Staff worked together to ensure that children were always accounted for, undertaking regular headcounts, such as when children moved between inside and outside, and when they arrived and left the setting. A safe and secure door entry system ensured the safety of children at drop off and collection times.

The layout of the setting enabled children to have free flow access to outdoors, which meant they could make choices of where they wanted to play. Core provision was provided for children's interests and children were seen to enjoy art and crafts, water, sand and dough. Play spaces reflected children's interests and preferences, and staff supported children during play.

The service had made improvements since the previous inspection to keep the playroom tidier and floor spaces clear including the use of a tidy up song for children. However, at times within the day, the literacy area and house area were not always inviting. Staff should continue to reset areas and support and

encourage children to help tidy up. This would encourage their independence, sense of responsibility and take pride in their environment.

Children's health and wellbeing was promoted as effective infection prevention and control measures were in place. Handwashing took place regularly including when coming in from outdoors and before mealtimes. Nappy changing areas were clean, with protective personal equipment (PPE) being stored appropriately.

Risk assessments were in place for indoor and outdoor environments which raised staff awareness of potential risks, benefits, and measures to support a safe environment. These were reviewed as changes occurred. This ensured they were current and adapted as needed.

Regular outdoor play using a range of equipment helped promote children's physical skills. The outdoor area was small, however, was fully utilised including the use of a mud kitchen, painting opportunities and natural resources. These supported children's imagination and creativity. Parents told us, "Although the outdoor space is small it is well-loved".

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 3.1: Quality assurance and improvement are well led

The manager and staff team engaged well with the inspection process and demonstrated a positive attitude towards change and improvement. Staff spoke positively about the manager and told us they felt well supported. Staff promoted the vision, values, and aims of the service through their practice and experiences offered.

The service improvement plan had been developed which identified priorities for the following year. These included language and literacy and a key focus on transition. The service was planning a proposed move to new premises which would be a fully outdoors setting. Staff had a good knowledge of these priorities, and we could see in practice how improvements had been made. For example, a newly developed literacy area and training opportunities in outdoor learning.

Children and families experienced a warm, welcoming, and inclusive ethos. Parents were welcomed into the service at drop off and collection of their child. This gave parents regular opportunities to speak with staff which helped develop relationships and communication. Staff told us they were keen to further support ongoing ways of engagement with families and continue to strengthen relationships. Parents gave us positive feedback on communication with staff and their involvement in the service. Comments included, "The service often do parent surveys looking for feedback and suggestions, they also take on board direct suggestions from the children regarding activities they'd like to do" and "Lots of opportunities to give feedback informally".

Self-evaluation was supported through a variety of quality assurance processes. This helped the manager and staff to assess and reflect on what worked well in the service and identify areas for development. For example, sharing of best practice documents, discussion through team meetings and audits, such as medication procedures. A monitoring calendar identified quality assurance and self-evaluation processes, for example, personal plans, planning and learning journals. We discussed with the service they should add

a monitoring system for the auditing of accidents and incidents. This would support the service to identify and highlight any action taken or required to support children's care and wellbeing needs.

Regular meetings gave staff opportunities to talk about successes and achievements, discuss any individual children's needs and next steps, and reflect on practice. Children's learning environments were reviewed regularly by staff, who consulted with children to ensure play and learning areas met their needs and interests.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

Staff were kind, nurturing, and caring. They worked well together to create a welcoming environment for children and families. This helped to create a positive atmosphere for both staff and children. Staff were very positive about team working and one staff member told us, "I feel we are a fantastic little team who come together and do our job well". Parents told us, "The staff are so warm and welcoming" and "Staff are incredibly approachable and very good at communicating".

The nursery was appropriately staffed, and staff were suitably deployed throughout the day to meet children's needs. Staff communicated regularly about children's individual needs and when a task took them away from their designated areas, such as supporting toileting needs. Staff were flexible in moving areas to support the smooth running of the service and being responsive to individual children. The manager supported staff by spending regular time in the playroom during busier times of day, such as mealtimes.

The service had an effective approach to staff training and meetings. These gave staff opportunities to reflect on priorities and plan for ongoing improvements. Most staff had completed mandatory training of child protection, food safety and first aid. They were also encouraged to build further skills and knowledge in areas of individual interests, for example, outdoor play and learning, with a focus on forest school experiences for children.

Since the previous inspection improvements had been made to safer recruitment procedures. All appropriate checks had been carried out for newly appointed staff to ensure the safety and welfare of children, and all staff were registered with the Scottish Social Services Council (SSSC). Staff were supported by the induction process which provided a good understanding of expectations and responsibilities of the role.

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

Requirements

Requirement 1

By 31 July 2024, the provider must ensure that safe recruitment processes are carried out and completed prior to staff starting their employment in the service. This includes the collection of Protection of Vulnerable Group disclosure checks (PVG), and two suitable references. Prompts on reference forms should also be added to ensure the name of the person within the organisation and their position held are clear. This would ensure the safety and welfare of children are prioritised.

This is in order to comply with section 7(1)(a, b) of the Health and Care (Staffing) (Scotland) Act 2019.

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

'I am confident that people who support and care for me have been appropriately and safety recruited' (HSCS 4.24).

This requirement was made on 5 June 2024.

Action taken on previous requirement

The manager had reviewed safer recruitment processes. Recently employed staff had all appropriate checks in place, including PVG's and two professional references prior to starting employment. This ensured the safety and welfare of children were prioritised.

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 minimise any potential risks to children, the provider must ensure all children's health and medication information is clear and provides staff with the level of detail needed to respond to medical needs effectively and safely.

This should include, but not be limited to, having a plan detailing all identified health needs, dosage and how staff should support a child in a stepped approach. The detailed plan should be stored with the

medication for accessibility, along with administration forms. All staff should understand and be aware of children's health and medication needs within the setting.

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 because people have the necessary information and resources' (HSCS 4.27).

This area for improvement was made on 5 June 2024.

Action taken since then

Medication procedures had been amended and updated. All children had individual medication boxes easily identified with child details and photograph. All health needs dosage and stepped approach were easily accessible for each child. Medication guidance had been shared with all staff.

This area of improvement has been met.

Previous area for improvement 2

To ensure the health and wellbeing of children and staff, and reduce the potential for infection, the service should ensure effective handwashing throughout the day. This should include, but not necessarily be limited to when they enter the setting, before and after any eating, and after any play outdoors.

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 area for improvement was made on 5 June 2024.

Action taken since then

Children were observed washing their hands routinely throughout the day, and before and after eating. Staff supported some children at mealtimes to wash their hands to prevent potential infection.

This area of improvement has been met.

Previous area for improvement 3

To ensure that there is a culture of continuous improvement, for example, ensuring required timescales for personal plan reviews are met, effective quality assurance processes should be developed to monitor and assess the service in line with best practice and legislation. This should include the development of a quality assurance calendar to support the service with timely reminders of important quality assurance tasks.

This is to ensure that care and support 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).

This area for improvement was made on 5 June 2024.

Action taken since then

Quality assurance systems had been improved and clear systems were in place to review children's personal plans. A quality assurance calendar highlighted tasks to be carried out in a timely manner, for example, medication audits.

This area of improvement has been met.

Previous area for improvement 4

To ensure children's health, safety and wellbeing, the service should update their knowledge and understanding about notifications that should be made to the Care Inspectorate.

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

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

This area for improvement was made on 5 June 2024.

Action taken since then

The manager has updated their knowledge about notifications and has a clear understanding of what should be submitted to the Care Inspectorate.

This area of improvement has been met.

Previous area for improvement 5

To minimise disruption to children's routines, care, support, and learning, the service should ensure arrangements for absence are managed effectively with staff members who have been safely recruited. Policies and procedures should be developed to guide the service in an approach to ensure this is safely and effectively managed and followed.

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 is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14); and

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This area for improvement was made on 5 June 2024.

Action taken since then

Since the previous inspection new staff have been employed and all safer recruitment practice followed in line with current guidance. Clear policies and procedures were in place for any future recruitment.

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.

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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