

# Inspection Report

## 2023-2024

## Gloryland Sunbeams Nursery

Child Day Care Centre

23 February 2024

**Under the Regulation of Care Act 2013 and  
Regulation of Care (Care Services) Regulations 2013**



**DHSC**

We carried out this inspection under Part 4 of the Regulation of Care Act 2013 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements, regulations and standards associated with the Act. We looked at the overall quality of the service.

We carried out this unannounced inspection on 23 February 2024. The inspection was led by an inspector from the Registration and Inspection team.

### **Service and service type**

Gloryland Sunbeams Nursery is a child day care centre. This means they provide day care for one or more children under the age of eight for more than two hours in the same day and is not a private dwelling.

### **People's experience of using this service and what we found**

To get to the heart of people's experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions form the framework for the areas we look at during the inspection.

### **Our key findings**

Areas of improvement were identified as a result of this inspection.

Improvements had been made by the provider in response to the previous inspection.

All equipment and areas appeared to be clean, with some furniture observed to have been replaced. Documents had been amended as required to reflect compliance with the standards.

The registered manager is also the responsible person for the setting and she was available throughout the inspection. She was able to provide all the requested paperwork and answer any questions about the service.

Staffing levels were found to be safe. All new staff had completed their induction and appeared to have settled in well. The children appeared to be confident and comfortable in the setting and the interaction between the staff and children appeared natural and positive.

The setting provides care for children under two years of age. The setting has four areas which the children use. These areas are decorated in a child friendly way with lots of bright colourful posters and pictures and crafts the children had made.

The staff take it in turns to organise the weekly activities on a rota basis. Within the team, daily tasks are allocated and these are on display so that all staff members were aware of their specific responsibilities regarding the children and the service each day. Activities are planned to ensure the children were receiving a care service that promoted their development.

Staff appeared to understand the children's needs and were observed managing children's behaviour in a positive way; encouraging and engaging them to ensure their inclusion in activities.

There was lots of thank you cards and notes on display the service had received from parents. Feedback received from the parents of the children who attend the nursery was positive.

"I get a daily briefing when I fetch [..]. With [...] being a baby, they give me the details of their eating; naps and nappy changes daily"

"we are very happy with the Nursery."

"[...] runs to [...] in the mornings and gives them a big hug".

"I am happy with the level of care provided"

"They are a kind and compassionate team"

Parents responded to the questions below

How well do you feel the staff team know your child? - "Very well, surprisingly so. They know them to the tiniest of details"

Are you happy with the care being provided? "Yes, I am very pleased"

### **About the service**

Gloryland Sunbeams Nursery is located in St Thomas Hall, Park Road in Douglas.

The building is set out all on one level and consists of three main areas for use with the children and several smaller areas including a baby changing area, toilets, some storage an office and the reception area.

The areas used by the children include a large open plan child friendly play area. This encompasses a quiet area which can be used for children to sleep in and several areas set out with play equipment for free-play.

There was a dining room and kitchen area where breakfast and lunch is served and eaten. A quiet sleep room has several cots in it which is staffed when in use and a small outside play area which is securely fenced and gated at the front of the building.

They are registered to care for no more than 21 (twenty one) children in total aged from birth to 2 (two) years of age.

### **Registered manager status**

The service has a registered manager. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

### **Notice of Inspection**

This inspection was part of our annual inspection programme which took place between April 2023 and March 2024.

Inspection activity started on 1 February 2024 and an unannounced inspection was undertaken on 23 February 2024.

### **What we did before the inspection**

We reviewed information we received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR) and supporting documentation, notifications, complaints/compliments and any safeguarding issues.

We sourced feedback via email from the parents whose children attend the setting.

### **During the inspection**

We spoke with three members of staff, one of the directors and the registered manager. Observations were carried out in the main play area using an observational framework for inspection. This is a way of observing care to help us understand the experience of staff and children.

A visual inspection of all areas in the setting was undertaken and a range of documentation was reviewed. This included a number of policies, children's records, information in regards to staff training, attendance records and health and safety information. The files for three new members of staff were examined in relation to recruitment, induction and training.

**Our findings:**

Safe – this means we looked for evidence that children were protected from abuse and avoidable harm. The service does not require any improvements in this area.

This service was found to be safe.

**Staffing ratios and recruitment**

Staffing levels were observed to be safe with staff:child ratios meeting the required levels. On checking the setting's attendance records there was evidence that correct staffing ratios were maintained for the period examined.

Three new members of staff had commenced their employment at the setting since the last inspection. Examination of their files showed the provider had carried out all pre-employment checks to ensure each was suitable to work with children prior to their respective start dates.

New staff are being given a structured induction when they start their employment. During this induction, they are given information about the setting including the disciplinary procedure. Regular support meetings with management are undertaken in order to ensure each new member of staff are supported through the process. All Induction records were signed by the staff member and manager and dated.

Training records for new staff were checked to ensure they had completed the required training. Where training hadn't been completed due to having to access an outside agency, these had been scheduled to take place.

Evidence was available to show that all staff held a current Disclosure and Barring Service (DBS) check and that checks were being undertaken on those that have signed up for the update service.

**Improvements lessons learned**

Processes were in place to ensure staff receive regular supervisions, evaluations and annual appraisals.

Staff were able to explain the process to follow should they have any issues or concerns but said they were happy and liked working in the setting.

There was a safeguarding children policy in place supported with a flowchart of the process which was available to all staff. There was a copy of the management structure displayed on the staff notice board to ensure all staff are aware of who to contact with concerns.

Staff confirmed they are made aware of the processes for reporting accidents and incidents during their induction and have signed to say this has been explained to them. Accident records were checked and were found to include all relevant details.

## Inspection Findings

### C2 Is the service effective?

#### **Our findings**

Effective – this means we looked for evidence that children’s care, learning and development are supported and achieving good outcomes. The service does not require any improvements in this area.

This service was found to be effective.

#### **Supporting and developing children’s care and development needs**

Observations showed the staff team were actively developing the children’s awareness and understanding of right and wrong. This was done by gentle reminders and using distraction methods.

There was a child behaviour policy and an anti-bullying policy in place. These described the accepted approach of the service to managing behaviour.

Throughout the inspection we were able to observe staff acting as positive role models to the children. Staff divided their attention between the children and ensured all children were being given attention in turn. Staff gave praise and encouragement to the children and spent time explaining things to the children, using age appropriate language.

## Inspection Findings

### C3 Is the service caring?

#### **Our findings**

Caring – this means we looked for evidence that the service involved and treated children with compassion, kindness, dignity and respect. The service does not require any improvements in this area.

This service was found to be caring.

#### **Ensuring children are being treated with kindness, respect and compassion**

During the inspection observations found staff to be caring and respectful to the children. They treated them with kindness and compassion and showed knowledge of the children's communication needs. These were mainly nonverbal and responded to appropriately.

The children appeared relaxed and confident with each of the staff and their interactions indicated they were comfortable in the setting. Observations showed lots of appropriate cuddles and hugs being used by the staff throughout.

#### **Maintaining children's dignity, privacy and promoting independence**

The children's folders contained information provided by the parents in regards to their children's preferences and needs. Activities including feeds and sleeps were planned around each child's individual routine and this was reflected in the daily notes made for each child.

During discussion, staff were able to explain how this information has been shared with them and where to find the information if they needed it.

The children's Learning Journals showed evidence of the staff encouraging each child's development through exploration of the outside world on walks, crafts and learning through play.

There was a Confidentiality policy and an Intimate Care policy in place which had been reviewed.

During the inspection several of the younger children were observed sleeping in one section of the room. They were being monitored constantly and, as each child woke up, they were given hugs and reassurance as they were integrated back into the main room.

## Inspection Findings

### C4 Is the service responsive?

#### **Our findings:**

Responsive – this means we looked for evidence that the service met children’s needs. The service does not require any improvements in this area.

This service was found to be responsive.

#### **Delivering personalised care**

There was both an Equal Opportunities and an Additional Needs policy in place. These had been reviewed.

Before children start attending the nursery, parents are asked to complete registration paperwork that asks for information about any cultural needs, languages, dietary preferences/requirements and or any medical conditions their child may have. There was also information regarding preferences around feeds, nap times and drinks. This information was kept on the child’s file and information was shared with the staff team during team meetings. The minutes of team meeting seen reflect this.

Staff plan the activities for the children. They use the information provided by the parents as well as their own knowledge of the children to devise age appropriate activities for the children. There were lots of pictures and crafts on display which reflected these activities. Staff were able to describe the activities the children particularly like doing and how they use circle-time and morning songs to help promote their development.

There were various toys available to the children which were laid out in a manner that encouraged the children to play freely and to make their own choices about what they wanted to play with.

The setting had resources available which allows for the promoting of awareness of diversity, equality and inclusion. There were a number of cultural festivals and traditions included in the year’s planning.

During the inspection staff were observed sharing daily information with a parent when they came to collect their child.



## Inspection Findings

### C5 Is the service well-led?

#### **Our findings**

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture. The service does require improvements in this area.

This service was found to be well-led.

#### **Clear vision and strategy in place to deliver high-quality care and promote a positive culture that is person-centred, open, inclusive and empowering which achieves good outcomes for children.**

During this inspection, we spent time talking with the staff and observing the relationships between them. The team had several new members of staff who, during discussion appeared to have good interactions with each other. They appeared to get on well and be comfortable with each other. There was banter between them and they all showed enthusiasm for the job they were doing.

Staff were able to describe how they plan the activities with each other, this helps them recognise the differing skills and knowledge they each have to bring to the setting. They were able to explain how the daily tasks were divided and how this enables them to work well together.

Each were aware of their responsibilities that day but they said that if they couldn't remember, there was a chart displayed to help them see their own and each other's tasks for the day. All staff and the staff teams appeared to work well together.

Staff said they had attended team meetings and this was where they could plan activities as a team with the registered manager. They said that if there was a problem, they would raise it with the manager who, they felt confident, would deal with it.

The registered manager works as part of the team on a daily basis. This allows her to monitor staff relationships and to deal with any issues that might develop.

#### **Governance framework in place that ensures responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed.**

Since the last inspection the setting has put formal processes in place to ensure that staff feel valued in their work.

Induction records, the 6 weekly induction review meeting, staff meetings, evaluations, supervisions and appraisals are being used to monitor staff performance and promote staff development. These records were checked for content and accuracy, some of the dates on the records showed inaccuracies.

Risk assessments and policies, alongside daily checks, were in place to monitor the environment and ensure safety. Accident forms are reviewed and we were informed actions would be taken to reduce the risk of the accident occurring in the future.

### **Continuous learning, improvement, innovation and ensuring sustainability.**

Resources were being made available to the staff team to enable them to extend their knowledge and skills. One staff member had indicated previously that she wanted to train as a teacher. She told us she had been supported by the setting in pursuit of this goal and will begin her training in September at a UK university.

Staff training records showed that all staff had completed or were scheduled to complete the required training. Staff also attend in-house training on a variety of relevant subjects and are encouraged to request training in line with their personal development plans.

#### **Action we require the provider to take**

Key areas for improvement:

- Documents must be checked for accuracy, especially regarding the recording of the year in dates. [This improvement is required in line with Regulation 14 of the Care Services Regulations 2013 - Records](#)

If areas of improvement have been identified the provider will be required to produce an action plan detailing how the areas of improvement will be rectified within the timescales identified. The R&I team will follow up and monitor any actions undertaken.