

Areas for improvement	Action required	Stakeholders & timescale	Desired outcomes for children	Evidence and confirmed completion
<b>How good is our care play and learning? 1.1 Nurturing care and support &amp; 1.3 Play and learning</b>				
<p>a) Ensure children's up-to-date care and support needs are included within their personal plan and staff use this information to effectively support them.</p> <p>b) Ensure staff are well informed about the children attending and use this information to provide individualised and responsive care relevant to their needs.</p> <p>c) Ensure children are treated with respect and loving, caring interactions.</p>	<ul style="list-style-type: none"> <li>• Staff to be given feedback on the draft CI report, with discussion around improvements required and their role in this.</li> <li>• Personal plan formats are to be reviewed and redeveloped.</li> <li>• Personal plan formats to be discussed with the team so that everyone is well informed of what is required and why.</li> <li>• Update of personal plans, using new formats, to be undertaken with all families with a focus on strategies for support.</li> <li>• IEP's and PCRA's to be developed for children who require, based on both personal plan information and observations.</li> <li>• Overview sheets of children's needs are to be developed and shared with all staff, focusing on individualised and responsive care needs.</li> <li>• Enhanced practice observations will be carried out, with staff practice discussed at regular 1-2-1 support meetings.</li> </ul>	<p>PT &amp; SEYP – By 21<sup>st</sup> April</p> <p>PT &amp; LLO – By 19<sup>th</sup> April</p> <p>DHT, PT &amp; SEYP – By 24<sup>th</sup> April</p> <p>PT, SEYP &amp; KW 's – By 12<sup>th</sup> May</p> <p>Whole Team – By 12<sup>th</sup> May</p> <p>PT &amp; SEYP – By 12<sup>th</sup> May</p> <p>DHT &amp; SEYP – By 15<sup>th</sup> May and ongoing</p>	<p>Children will have detailed personal plan which detail the strategies needed to be able to meet their care and learning. These will be fully implemented by the staff team, ensuring children feel loved and respected and receive consistent, high-quality personalised care.</p>	
<p>a) The manager and staff are competent in and knowledgeable about national, local, and the service's own child protection procedures and GIRFEC.</p> <p>b) Staff follow the service's own procedures when reporting to ensure appropriate action is taken. This includes the reporting of accidents and incidents.</p>	<ul style="list-style-type: none"> <li>• New reporting formats to be implemented so that all information is recorded in one place by all staff and management team to then follow up and report appropriately.</li> <li>• Child protection refresher training to be revisited by all staff and procedures read.</li> <li>• Child Protection procedures to be addressed as a team, ensuring all staff are aware of who to contact (these are already displayed) and what information should be recorded.</li> <li>• In-service day and future staff meetings to be utilised to discuss scenario situations with staff as part of their quality assurance.</li> </ul>	<p>PT &amp; SEYP – By 18<sup>th</sup> April</p> <p>All staff – By 5<sup>th</sup> May</p> <p>All staff – By 2<sup>nd</sup> May</p> <p>DHT &amp; SEYP – By 2<sup>nd</sup> May and ongoing</p>	<p>Children will be well protected from harm and any information required to support them to do so will be shared appropriately to ensure that their welfare is paramount at all times.</p>	
<p>a) Undertaking a full review of all medication to ensure details and records are up-to-date.</p> <p>b) Carrying out a review of long-term medication every three months along with parents.</p>	<ul style="list-style-type: none"> <li>• Medication forms reviewed with parents present, medication plans added to medication boxes and forms organised clearly.</li> <li>• All medication currently in setting to be reviewed again to double check details with any improvements addressed.</li> </ul>	<p>PT &amp; SEYP - 29<sup>th</sup> March</p> <p>LLO – By 28<sup>th</sup> April</p>	<p>Children's medical needs will be well documented and shared across the team to ensure that where they require medical support, this</p>	

<p>c) Ensuring staff are knowledgeable and competent in the safe storage, recording, and administration of medication.</p>	<ul style="list-style-type: none"> <li>Medication audits will be regularly undertaken to ensure that all medication is up to date, reviewed, stored and administered correctly.</li> <li>Medication policies and procedures will be reviewed by all staff together to ensure they are aware of best practice.</li> </ul>	<p>DHT &amp; SEYP – Termly</p> <p>Whole team – By 2<sup>nd</sup> May</p>	<p>is done so safely and sensitively, allowing children to feel secure in their health needs being met.</p>	
<p>a) Ensuring staff are knowledgeable in supporting children's learning.  b) Pick up and drop off times are not disruptive of children's play.  c) Meaningful play experiences are planned to meet the needs of the children</p>	<ul style="list-style-type: none"> <li>Clear risk assessment and procedure to be implemented around transition times and pick up / drop off to ensure safety, whilst disrupting play as little as possible. Information to be shared with parents explaining changes and the reasons for this.</li> <li>Planning board to be utilised by the whole team to show both responsive and intentional planning.</li> <li>Discussions to be revisited in regard to observations and planning training.</li> <li>Staff to have written clear expectations in terms of what is required for observations and planning and be held accountable to these, receiving support where required.</li> <li>Communications to be shared with parents around the intentions of observation and planning and what they should expect, with the intention of involving them more in children's learning and linking to home.</li> <li>Planning and observations to be reviewed and audited regularly.</li> </ul>	<p>DHT &amp; SEYP – By 24<sup>th</sup> April</p> <p>Whole team – Ongoing</p> <p>Whole team - May</p> <p>Whole team – May</p> <p>DHT, PT &amp; SEYP – June</p> <p>DHT, PT &amp; SEYP – Termly</p>	<p>Children will benefit from relaxed, uninterrupted play experiences which are well planned around their individual needs and extend their learning in a way which is personal to them. These being shared with families will allow the further extension of learning opportunities at home and promote a consistent approach to care and learning.</p>	

**How good is our setting? 2.2 - Children experience high quality facilities**

<p>a) The manager and staff are aware of the factors which raise the potential risk of children leaving the environment unsupervised and of unfamiliar adults entering the building and take action to prevent any occurrences. Effective risk assessments are carried out by competent staff.  b) The playroom is furnished to support children's independence and choice. This includes areas</p>	<ul style="list-style-type: none"> <li>Dedicated member of the staff team will be on rota to continue to man the doors during pick up and drop off times, reminding parents not to allow anyone else to enter in with them.</li> <li>Broken resources were removed and reordered new. Maintenance log to be used to record any damaged equipment and ensure that it is dealt with immediately.</li> <li>Playroom area reviewed to ensure clearer access to children's resources, all areas cleaned and reorganised and staff team asked to ensure this is upkept. Items of clothing and shoes to be clearly labelled.</li> </ul>	<p>SEYP – Immediately and ongoing.</p> <p>PT &amp; SEYP – Immediately</p> <p>LLO &amp; SEYP – 10<sup>th</sup> April</p>	<p>Children will be safe and secure in their play area, able to access all spaces freely to encourage choice and autonomy.</p>	
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<p>where children's belongings are stored.</p> <p>c) Furnishings and fittings are safe and not broken.</p>	<ul style="list-style-type: none"> <li>• Clear risk assessment and procedure to be implemented around transition times and pick up / drop off to ensure safety. Information to be shared with parents explaining changes and the reasons for this.</li> </ul>	<p>DHT &amp; SEYP – By 24<sup>th</sup> April</p>		
<p>a) Ensure staff implement and sustain safe and effective infection prevention and control practices.</p> <p>b) Ensure nappy changing facilities and children's toilets are clean and tidy.</p> <p>c) Ensure handwashing facilities can be easily accessed.</p>	<ul style="list-style-type: none"> <li>• Setting deep cleaned, area's reorganised and moved around both in children's spaces and adult spaces to ensure that resources are clean, easily accessible and fit for purpose.</li> <li>• Cleaning rota implanted for kitchen area's and toilets with designated staff member each day, regularly checked by a member of the management team as part of QA calendar.</li> <li>• All staff to redo IPC training and then further review procedures as a team at in-service day.</li> </ul>	<p>Whole team – 10<sup>th</sup> April</p> <p>PT, SEYP &amp; LLO – 19<sup>th</sup> April</p> <p>Whole team – By 2<sup>nd</sup> May</p>	<p>Children will access a clean, safe and inviting environment which is clear of any hazards.</p>	
<p><b>How good is our leadership? - 3.1 Quality assurance and improvement are led well</b></p>				
<p>a) Ensure staff are aware of and follow the vision, values, and aims for the setting.</p> <p>b) Ensure effective quality assurance and self-evaluation are in place which have involved staff, children, and parents and lead to continuous improvement.</p> <p>c) Ensure that staff have the capacity and skills to support a programme of continuous improvement</p>	<ul style="list-style-type: none"> <li>• Discussions to be held around ensuring that children are sensitively and respectfully cared for at all times and issues immediately addressed.</li> <li>• Quality Assurance calendar to be implemented including regular termly audits of key areas such as personal plans, observations and medication.</li> <li>• Consultation to be held with all staff to agree values and boundaries to ensure consistent approaches are used throughout.</li> <li>• Inservice day in May to be utilised for full team discussion, reflection on current VV&amp;A, staff training and reviewing of procedures.</li> <li>• Increased staff observation to be undertaken by to identify any areas for development and training / support required.</li> <li>• Communication methods with families to be increased to include regular communication through ILD, newsletters, questionnaires and "you said, we did" to inform of any improvements.</li> <li>• Refreshed remits to be created for all levels of the team to ensure that roles are clear.</li> <li>• Welcome booklet to be updated with key information for families.</li> <li>• VV&amp;A to be refreshed to be more nursery specific and involve children and families.</li> <li>• Self-evaluation to be carried out regularly, in conjunction with families, using key document to evaluate with clear improvement plans devised.</li> </ul>	<p>DHT &amp; SEYP - By 26<sup>th</sup> April</p> <p>DHT &amp; PT – By 2<sup>nd</sup> May</p> <p>Whole team – By 2<sup>nd</sup> May</p> <p>Whole team – 2<sup>nd</sup> May</p> <p>DHT, PT &amp; LLO – Ongoing from May</p> <p>DHT, PT &amp; LLO – Ongoing from May</p> <p>Whole team – By 5<sup>th</sup> June</p> <p>Whole team – June</p> <p>Whole team – June</p> <p>Whole team – Ongoing from June</p>	<p>Children will be respectfully and sensitively cared for in an environment which promotes continual reflection and improvements, based on the needs of current children and families.</p> <p>Children and families will have their opinion sought and listened to and be fully involved in self evaluation and improvements.</p> <p>Children will benefit from a staff team which provide consistent approaches to their care.</p>	

**How good is our staff team? – 4.3 Staff deployment**

<p>a) Management arrangements for the service are effective to support consistent high-quality outcomes.</p> <p>b) Staff are given the required guidance, mentoring, and support to allow them to effectively meet children's needs.</p> <p>c) Staff communicate effectively with each other to ensure the best possible outcomes for children.</p>	<ul style="list-style-type: none"> <li>• Temporary full time PT post implemented to support improvements, LLO to visit at least once per week to support and ensure progress and SEYP secondment advertised to fill vacancy.</li> <li>• Communication books and information sharing formats to be introduced.</li> <li>• Planning board to be utilised by all staff to share outcomes for children and next steps.</li> <li>• Regular staff meeting's and daily huddles to be undertaken to ensure needs are discussed.</li> <li>• Regular 1-2-1 meeting's to be held with all staff members focusing on support and development.</li> </ul>	<p>PT &amp; LLO – By 17<sup>th</sup> April</p> <p>PT &amp; LLO – By 17<sup>th</sup> April</p> <p>Whole team – Ongoing</p> <p>DHT, PT &amp; SEYP – 2<sup>nd</sup> May</p> <p>DHT, PT &amp; SEYP – Ongoing from May</p>	<p>Children will be supported by staff who are knowledgeable and fully aware of their care and learning needs and are able to communicate effectively in order to promote these, improving outcomes for children and families.</p>	
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**Key**

DHT – Depute Head Teacher & Registered Manager

PT – Principal Teacher

SEYP – Senior Early Years Practitioner

LLO – Locality Lead Officer

KW – Key Workers