

Thrive Childcare and Education Happitots Robroyston Day Care of Children

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Type of inspection:
Unannounced

Completed on:
12 June 2025

Service provided by:
Enchanted Forest Nursery
(Bishopbriggs) Ltd

Service provider number:
SP2015012422

Service no:
CS2015334602

About the service

Thrive Childcare and Education Happitots Robroyston was registered with Care Inspectorate on 22 May 2015. The service is provided by Enchanted Forest Nursery (Bishopbriggs) Ltd and is registered as a day care of children service to provide a service to a maximum of 81 children not yet attending primary school at any one time.

No more than 24 are aged under 2 years, and no more than 57 are aged 2 years to those not yet attending primary school full time, with no more than 25 aged 2 to under 3.

At the time of inspection 76 children were registered with the service.

About the inspection

This was an unannounced inspection which took place between 10 and 12 June 2025. The inspection was carried out by three 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 children using the service
- received feedback from families using the service through an electronic questionnaire
- spoke with all staff and management
- observed practice and daily life for children
- 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 happy and having fun.
- Children experienced warm, caring and responsive care from staff.
- Strong relationships had been established with families to support continuity of care for children.
- Personal plans should continue to be developed to include support strategies for all children.
- Planning for play and learning experiences should continue to be developed to demonstrate a balance of child initiated and adult supported learning.
- Quality assurance processes including self-evaluation and monitoring aspects of service delivery should continue to be imbedded.

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?	3 - Adequate
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?

3 - Adequate

We evaluated different parts of this key question as adequate and good, with an overall grade of adequate, where strengths only just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

Children were happy, settled and having fun. They experienced nurturing and responsive care from staff which helped them to feel respected. Staff providing praise, cuddles and reassurance which meant attachments and relationships were strong. As a result, children were happy and felt safe and secure.

Building relationships with families was important to staff and contributed to their positive attachments with children. All families who responded to our questionnaire agreed they had good relationships with staff caring for their child. Comments made included; "My child has developed a lovely bond with the workers at nursery and looks forward to going" and "The staff are really caring, my child loves going to nursery."

Children experienced sensitive and dignified support for their personal care needs. Staff were aware of safe nappy changing guidance and children were encouraged with prompting from staff to independently undertake personal care tasks such as washing their hands and face. This helped to build children's self-esteem.

Meals were nutritious and took account of children's allergies and dietary requirements. Mealtimes were relaxing and unhurried with older children having opportunities to develop responsibility and independence skills. For children attending the 2-3 year old's playroom, further opportunities to promote their independence could be provided to enable them to develop skills for life.

Sleep routines from home were not consistently followed to support children's emotional security. Whilst we recognise that children were comforted and settled to sleep using soothers and transitional objects from home, this was not always promptly in response to children's cues for rest. Staff caring for younger children should ensure that opportunities for rest and sleep are provided to children without delay to ensure their wellbeing is supported by sensitive sleep arrangements.

A new format for personal planning had been introduced and staff had responded positively to this change. Information was gathered from families to support staffs understanding of each child's health, welfare and safety needs. This included individual preferences and home routines. Staff should now use the information gathered to inform children's individual next steps and outline how they plan to meet their needs. This will ensure that children receive the right support at the right time (area for improvement 1).

Quality Indicator 1.3: Play and learning

The introduction of soft furnishings and natural materials within each playroom supported a calm homely environment for children to play and explore. Children's photographs and some artwork was on display throughout the setting, providing them with a sense of belonging.

Children had fun throughout their day. They were happy and confident in the setting and approached staff for assistance or to include them in their play. Children were able to access resources independently and choose where and how to play and explore, supporting their independence.

Child-centred planning systems were not yet fully established. Whilst we recognise that comprehensive training and support had been provided for staff deployed within the 3-5 playroom, this had not yet been shared with staff supporting younger children. As a result, there were missed opportunities to plan for and extend children's ideas, interests and curiosities. To ensure children benefit from play opportunities that meet their needs, planning for play and learning should be further developed to ensure a balance of child initiated and adult supported learning. An area for improvement has been in place since September 2022 to improve planning processes, which had not been met. This area for improvement remains in place.

Staff used an online application called 'learning journals' to communicate with families, sharing updates and general information. Where staff had received support to follow a child's interest this was well evidenced for the individual child. However, this was not consistent for all children. Overall, the quality of observations varied and some lacked analysis of learning. A more focused and consistent approach was needed to support staff to track children's progression over time. Parents told us they would like; "regular updating of the online journals" and "More updates and photos online." Ensuring all families receive regular updates would support them to feel included in their child's learning and development.

Areas for improvement

1. To support individual children's health and wellbeing needs, the provider, manager and staff team should ensure all children have a fully completed and comprehensive personal plan in place that sets out how their health, welfare, and safety needs will be met. Plans should detail, amongst other things, clear strategies that outline how staff will meet children's needs. These should be developed and reviewed with children and families in line with the required timescales.

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

How good is our setting?

4 - Good

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

Quality Indicator 2.2: Children experience high quality facilities

Children and families benefitted from a clean, homely and comfortable environment which promoted a sense of inclusion. An inviting and calming reception area supported families to feel welcomed into the setting. Temperature and ventilation supported children's comfort and playrooms were well furnished and decorated in calm muted tones to support their engagement and wellbeing. This demonstrated children and families that their comfort was important.

Secure boundary fencing and locked gates were in place to keep children safe. Attendance registers and regular headcounts were undertaken, and whiteboards updated to ensure staff were aware of the total number of children present at any time. This contributed to children's safety.

Daily checks and environmental risk assessments were in place. Some children were involved in risk assessing within their play environment and staff promoted their awareness of how to be safe.

when climbing and balancing outdoors with natural materials. This supported the development of life skills and a connection with nature.

Children aged 2-5 years old, had direct access to outdoors and could choose to play between indoors and outdoors. Improvements had been made to their shared garden to support sensory and physical play. To support younger children access outdoors routinely and support their schematic learning, further developments are needed within the 0-2 garden to ensure this is accessible daily. The manager should continue with their engagement with Care Inspectorate's improvement team and their plans to further develop and enhance the quality of outdoor provision.

On the first day of our inspection, we observed that children's sensory, imaginative and creative play opportunities could be further supported. By the second day, improvements had been made to the layout and resources within all playrooms to encourage children's self chosen play. Self-selection areas were resources within play zones and some areas were equipped with natural, open-ended materials. As a result, children were having fun. We discussed with the leadership time the importance of monitoring playrooms to ensure children have access to a wide variety of play and learning experiences that supports their creativity and curiosity every day.

How good is our leadership?

3 - Adequate

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

Quality Indicator 3.1: Quality assurance and improvement are led well

The visions, values and aims of the service had been reviewed in partnership with staff, children and families. As a result, they now reflected the aspirations of families and contributed to a sense of teamwork, commitment and a shared vision across the service.

The service improvement plan highlighted priorities which aligned with the findings from previous inspections. The service had met the areas for improvement contained within the plan at our inspection in October 2024. The leadership team should now review and update their plans for further development of the service ensuring the aspirations of staff, children and families are at the heart of any improvements. This will ensure they feel their views are listened to and that their opinions matter.

Overall, some quality assurance processes were in place to support the leadership team to audit and monitor the quality of the service. As they were at the early stages of development they were not yet supporting sustained improvements. For example, medication audits should be further developed to ensure they identify inconsistent record keeping. In addition, more routine monitoring of children's personal plans and learning journals could ensure consistency in staff recording and enable staff to demonstrate children's progress in learning. Monitoring processes should be further developed to support sustained improvements that positively impact children and families.

Families were involved in influencing the development of the service. Staff mostly gathered the views of parents informally at drop off and collection times and occasionally using questionnaires. There was scope to develop this further with more routine formalised approaches being imbedded in to practice, where suggestions are acted on and outcomes shared. Self-evaluation processes were at the early stages of development and staff were not confident with reflecting on or evaluating practice. The leadership team would benefit from more routine involvement of staff, children and families in evaluating aspects of service delivery and by implementing a framework such as Care Inspectorate's 'Quality Framework for Daycare of

Children, Childminding, and School-Aged Childcare' to inform reflections. This process would allow the team to identify strengths and areas to develop, this could support a shared vision for improvement.

Areas for improvement

1. To support and sustain continuous improvement that secures positive outcomes for children and families, the management team should embed robust systems to monitor and evaluate all aspects of their service delivery. This should include but is not limited to; monitoring staff practice and experiences for children, meaningful involvement of staff, children, parents and carers in the self-evaluation processes and developing a clear plan for improving the service by identifying key priorities. This would ensure children and families remained at the heart of all service improvements.

This is to ensure that management and leadership 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) and "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 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

Children benefitted from a caring and dedicated staff team who were warm and responsive in their approach with children. Most parents commented positively on the staff and the relationships formed with staff. Comments included; "The staff and management are lovely," "Staff are welcoming" and "The staff are really accommodating, friendly and trusting."

Staff told us they felt professionally and personally supported by the leadership team. They felt comfortable to raise concerns or ask for support if needed. A process for undertaking staff professional development reviews had recently been implemented with a focus on supporting staff wellbeing, team morale and professional development. This demonstrated to staff that their wellbeing was important.

Staff were recruited safely and registered or in the process of registering with Scottish Social Services Council (SSSC). We informed the leadership team that some staff members had achieved qualifications or moved employment without updating their registration. They took action to prompt staff and update records prior to the completion of our inspection. Maintaining accurate SSSC records ensures staff are deployed accurately inline with their registration category.

Staff breaks were effectively managed to limit interruptions to children's activities and daily routines. The use of consistent staff to cover lunch breaks, ensured children were cared for by familiar staff and ratios were maintained to ensure children's safety.

The provider had recently reviewed and improved their induction processes for newly recruited staff to ensure this aligned with The Scottish Government's National induction resource. Further improvements were needed for the internal induction of supply, agency or employed staff covering within playrooms to ensure they were well informed of children's individual needs. This would ensure they could provide daily care that supported children's wellbeing. For example, on the first day of our inspection, not all children

were cared for by staff that knew them well. As a result, some children were not stimulated, or their physical development fully supported. We shared our observations with the provider and leadership team who agreed they would review their internal induction processes to ensure staff are informed of children's needs prior to having responsibility to care for them.

Children's safety and wellbeing was protected by a clear safeguarding policy. Staff were aware of their roles and responsibilities to keep children safe and had recently attended child protection training. This meant that staff were confident with the appropriate steps to take to address any concerns should they arise.

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 wellbeing, learning and development, improvements should be made to the planning for play and learning processes. Children's ideas, wishes and interests should inform planned play experiences and should be evident within the observation, assessment and planning cycle. The provider, manager and staff should ensure that information about children's development and learning is consistently recorded and shared with parents.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am supported to achieve my potential in education' (HSCS 1.27) and '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 6 September 2022.

Action taken since then

Where children could verbalise to express their play interests, staff were responsive to this. Learning journals had been introduced and the management team told us they had plans to use the electronic application to track children's progress and achievement over time. However, this was not yet imbedded and as a result, it was not clear where support or challenge was offered to enable children to reach their potential. Management and staff should continue with their plans to implement a peer support model to build the team's confidence and skills with planning processes.

This area for improvement was not 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?	3 - Adequate
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	3 - Adequate
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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