

Hummingbird Out of School Care Limited

Day Care of Children

35 Moss St
Paisley
Renfrewshire
PA1 1DL

Telephone: 07833 291 263

Type of inspection:
Unannounced

Completed on:
24 June 2025

Service provided by:
Hummingbird Out of School Care
Limited

Service provider number:
SP2015012547

Service no:
CS2015342612

About the service

Hummingbird Out of School Care Limited is registered to provide a care service to a maximum of 57 primary school aged children at any one time. Of those 57 no more than 10 are aged 4 years to those not yet attending primary school at any one time. Two adults will be in attendance at all times. The service will operate from 7:00am to 9:00am and 3:00pm to 6:00pm during term time and 7:00am to 6:00pm during school holidays, Monday to Friday. On the day of inspection 31 children were present.

Hummingbird Out of School Care Limited provides an out of school care and holiday programme service in Paisley, Renfrewshire. Children accessed two playrooms on the first floor of an office building in the centre of Paisley.

About the inspection

This was an unannounced follow up inspection which took place on 23rd June 2025. The inspection was carried out by two inspectors from the Care Inspectorate. The inspection focused on the requirements and areas for improvement made during the previous inspection which took place on 7 and 8 April 2025. We evaluated how the service had addressed these to improve outcomes for children. During this follow-up inspection, we increased the evaluation for all quality indicators because the service had made progress by building on key strengths

Key messages

Improvement was evident in most required areas made during the previous inspection. As a result, children's needs were being met effectively.

The service had made satisfactory progress in five requirements made at the last inspection.
The service had made satisfactory progress in five areas for improvement set at the last inspection.

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?	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?

4 - Good

We previously made an evaluation of weak for this key question. We have now re-evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

1.1 Nurturing care and support

Children were happy, engaged, and having fun with their peers and staff in the service. We found staff were kind, patient and responsive to children's ideas and invitations to play. Staff provided praise and encouragement to children at appropriate times, which helped them to feel safe and welcomed. The staff and manager told us they had explored the United Nations Conventions on Rights of a Child (UNCRC) and Getting it Right for Every Child (GIRFEC) principle to ensure they were embedding a nurturing approach and supporting children to reach their full potential.

Following our previous inspection the team had reviewed the range of documents that would make up a child's personal plan. The team had introduced a new template that was now linked to the SHANARRI wellbeing indicators and complied with national best practice guidance. A key worker system had been established to ensure plans were updated when there were any changes to a child's individual needs. Children were fully involved in creating their own "All About Me" which detailed their likes, dislikes, and other useful information. This supported children to have ownership of their plans. The information recorded in plans detailed children's health, wellbeing, and safety needs. Strategies to support children's individual needs were now clear and recorded appropriately. This approach enabled all staff to deliver continuity of care and respond quickly and sensitively to any changes in a child's life.

We observed snack times during our inspection and found children now experienced a mealtime that was relaxed, unhurried and sociable. Children were fully involved in preparing and serving their own snacks and drinks. This supported children to develop their independence and life skills. Staff sat with children to supervise and engage in conversations. Children were respectfully reminded to sit while they ate to ensure they were not at risk of choking, this helped establish healthy eating habits. The service had recently reviewed the snack time menus with children after exploring the current best practice guidance. This ensured children's right to make choices was respected while providing a variety of healthy and well-balanced snack options.

The manager had reviewed the service's policy, procedures, and health consent forms for the administration of medication. We found they were now in line with best practice guidance. The manager had purchased a lock box to improve the safe storage of medication at the service. The improvements made ensured medication would now be administered and stored safely which promoted children health and wellbeing when attending the service.

The manager had reviewed and updated the services child protection and safeguarding policies and procedures; we found these were now in line with the National Child Protection Guidance. The manager had read the current national and local child protection guidance to ensure they understood their duty of care for children registered with the service. All staff had completed child protection training and could confidently discuss their roles and responsibilities for protecting children in their care.

1.3 Play and Learning

Children were having fun with their friends and staff on the days of inspection. We observed staff skilfully engage with children to extend their play experiences across the session. Staff were mindful of when to get involved and when to stand back and observe children's play. This supported children to meaningfully lead their play and learning at the out of school care.

The team had reviewed their process for planning activities and experiences weekly. One staff member now led weekly discussions with children on activities and ideas that could be planned for the following week. This was then incorporated into a planner that was on display in the playroom for children and families to see. The children and team had jointly created a summer activity planner which had a good balance of activity days in the local and wider community. We found that play and learning opportunities had improved which meant they were now relevant to children's current interests, personalised, and sufficiently challenging for children in attendance.

On the day of inspection we found there was a good variety of opportunities and experiences available for children to participate in, which stimulated their creativity, curiosity, and imagination. Children spent extended periods of time creating playdough, making leaf print paintings, playing schools and houses, gaming and constructing with various resources. This enabled children to widen their skills and consolidate their learning through play.

The manager and staff had revisited the Playwork Principles, UNCRC and GIRFEC to extend their knowledge and practice of the professional and ethical framework for Playwork. Staff could now confidently tell us about their role in supporting play for children and the impact they can have on children's play while attending the service. This approach could now support high quality play and learning being sustained in the service.

How good is our setting?

4 - Good

We previously made an evaluation of weak for this key question. We have now re-evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

We found the team had made significant improvements to the environment and resources available to children at the out of school care. Children could now lead their play and learning as they could freely access a good variety of toys and equipment at their level. New shelves and tubs in the playroom meant resources and toys were organised to easily allow children to make choices on what they wanted to play with. The team, in partnership with the children, had reviewed and updated the resources available. This meant children were now able to actively engage in rich and stimulating play, including loose parts play. Natural open-ended materials were now available in the playroom.

The team had increased children's access to outdoor play. After school, children had the choice to play in the local park or playground. The summer holiday planner showed trips to local parks, museums, and adventure playgrounds. This meant children were able to access their local and wider community which supported their connections and sense of belonging to the local area.

The environment had been cleaned, de-cluttered and organised, with old and broken toys and equipment removed. The space available to children was now bright, clean, and welcoming.

Play spaces were inviting and stimulating, sparking children's interests on the days of inspection. Maintenance issues highlighted at our previous inspection had been completed, including safety locks being added to the windows. This meant children were safe and secure in the environment.

Infection prevention and control measures had improved. We observed staff and children engage in good hand washing procedures. A deep clean of the environment had been undertaken and a daily cleaning schedule had been established. Staff were confident in promoting good infection prevention and control practices after completing training on infection prevention and food hygiene. This reduced the potential spread of infection and protected children's health and wellbeing while at the service.

The manager had progressed access to the appropriate number of toilets, as stipulated in the granted variation. Staff now had access to a toilet on the same floor as the out of school care, separate from children's toilets. Children could now access the appropriate number of toilets required in line with health and safety legislation.

Accident and incident procedures had been developed and were now in line with best practice guidance. A new form had been created to ensure staff could record the appropriate information to share with families following an accident or incident in the service. The policy had been updated to acknowledge when notifications should be made to the Care Inspectorate.

How good is our leadership?

3 - Adequate

We previously made an evaluation of weak for this key question. We have now re-evaluated this key question as adequate, where the strengths just outweighed the weaknesses.

The manager engaged well with the inspection process, they had continued to update inspectors on the improvement journey for the service. This showed us they had the motivation and capacity to make the required improvements. During our inspection we found all team members now embedded the service's vision, values and aims linked to the United Nations Conventions on Rights of a Child (UNCRC).

The culture of self-evaluation and improvement in the service had developed and we could now see the impact of the actions taken following our last inspections. Whilst improvements had been made, we discussed with the manager the importance of sustaining changes whilst continuing with long term improvement plans. This will ensure the service continues to deliver high quality care and play experiences for children and their families.

The manager had introduced a mind map for children in the playroom where their voices, ideas and suggestions could be recorded. We would encourage the team to continue to embed this process to ensure children are empowered to meaningfully influence the development of the service. The manager, in partnership with the team, should continue to explore ways to engage with families to develop a clear, realistic, and achievable long term improvement plan for the service.

The manager and staff had reviewed the Care Inspectorate Early Learning and Childcare services: Guidance on records you must keep and notifications you must make. The manager had updated policies and procedures for the setting to clarify when notifications must be made to the care inspectorate. This provided assurances that the manager and staff were aware of their responsibilities to notify the care inspectorate when significant events at the service occur.

How good is our staff team?**4 - Good**

We previously made an evaluation of weak for this key question. We have now re-evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children's experiences.

4.2 staff recruitment

Recruitment procedures had been improved and were now in line with safer recruitment legislation. The manager had revisited the Safer Recruitment Through Better Recruitment guidance and made necessary changes. All staff members had clear Protection of Vulnerable People (PVG) checks completed prior to commencing employment and working with children. Staff records were now organised and contained the appropriate information such as two references, identity, and health checks. This new process and procedure protected the welfare and safety of children attending the service.

4.3 staff deployment

All staff present on the day of inspection were open, friendly, and approachable. Staff reflected on the improvements they had achieved and the positive impact this had on children. They were committed to the ongoing developments in the service and were keen to tell us about their new leadership roles.

We found staff were now effectively deployed to meet the needs of all children attending the service. All staff meaningfully engaged with children across the session to support high quality interactions and promote fun. The changes to deployment meant staff could balance tasks and the needs of individual children during snack, play and when travelling to the setting from schools. This ensured continuity of care for children.

Staff communicated well with each other across the day. They were respectful in their engagement with each other and children, which promoted a positive and inclusive environment. We found staff were flexible in their deployment, which meant they could identify gaps in support required and respond to this efficiently. A new system had been established, staff were allocated an area in the playroom to cover, with one staff member available to move around the rooms to busier areas or when children required extra support. This ensured children were effectively supported and supervised when attending the out of school care.

Team meetings had been re-established to support effective communication and discuss changes to the environment, policies, and procedures. The team had revisited best practice guidance such as personal plans, medication, and mealtimes. The team had explored the Playwork principles, UNCRC, GIRFEC principles and SHANARRI wellbeing indicators together. This supported staff to further develop their knowledge and skills based on the underpinning frameworks, theories, and approaches for the sector.

The manager had introduced a new approach to identify ongoing professional development opportunities. A training matrix had been created to highlight suitable courses and professional reading for staff. New staff were being mentored, and plans were in place to support them to start qualifications that were relevant to their professional registration with the Scottish Social Services Council.

We suggested the manager explore the Early Learning and Childcare - National Induction Resource.

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

Requirements

Requirement 1

By 20th June 2025, the provider must ensure that the care and support needs of children are being effectively met. To do this, they must, at a minimum:

- a) ensure that every child attending the service has their own personal plan which clearly identifies strategies.
- b) ensure the plans include all aspects of the child's health, welfare, and safety needs and how the service intends to meet these
- c) put in place procedures to ensure that the plans are reviewed and updated every six months or before, depending on the needs of the children.

This is to comply with Regulation 5(1)(2)(a)(b)(c)(d) and (4) (Personal Plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). Inspection report Inspection report for Hummingbird Out of School Care Limited page 5 of 14 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" (HSCS 1.15). The management and staff should also consider referring to the Care Inspectorate's document: Guide for Providers on Personal Planning - Early Learning and Childcare.

This requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under Quality Indicator 1.1 nurturing care and support.

Met - within timescales

Requirement 2

By the 20th of June 2025 to ensure children's health, wellbeing and safety are upheld, the provider must ensure the manager and staff are confident and competent in their role to protect children from harm.

To do this, the provider must, at a minimum:

- a) ensure the manager and staff are competent in and knowledgeable about national, local, and the service's own child protection procedures.
- b) ensure the manager and staff are competent in using chronologies and child protection records to assess the level of risk to children, and that any concerns.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work and Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI 2011/2010). 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 understating of their responsibilities" (HSCS 3.20).

This requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under Quality Indicator 1.1 nurturing care and support.

Met - within timescales

Requirement 3

By 20th June 2025, the provider must ensure children's health, welfare, and safety. To do this, the provider must, at a minimum ensure that:

- a) The environment is clean, safe, and suitable for children to play and rest.
- b) Effective handwashing is taking place, and modelled by staff, when required, such as meal and snack times.
- c) Management have oversight to ensure they can identify and address gaps in infection prevention and control practices and risk assessments.
- d) Maintenance issues should be addressed including safety fittings on the windows.

This is to comply with Regulation 4 (1) (a) (Welfare of Users) 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: 'My environment is safe and secure' (HSCS 5.17).

This requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under Quality Indicator 2.2 children experience high quality facilities.

Met - within timescales

Requirement 4

By the 20th of June 2025, the manager should progress access to the appropriate number of toilet facilities required based on the number of children accessing the service. This is to improve the infection, prevention, and control measures and to respect children's privacy and dignity at all times.

This is to comply with Regulation 10 (Fitness of Premises) of the Social Care and Social Work Improvement Scotland (Requirements for Care Service) Regulation 2011 (SSI 2011/210). This ensures care and support is consistent with the Health and Social Care Standards which state that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes'. (HSCS 5.16).

This requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under Quality Indicator 2.2 children experience high quality facilities.

Met - within timescales

Requirement 5

By the 20th of June 2025, to ensure children consistently receive high quality play and learning experiences the manager should ensure effective quality assurance systems are developed and implemented to improve outcomes for children and staff. To do this, the manager must, at a minimum:

- a) ensure robust quality assurance processes are embedded to help identify areas for improvement.
- b) action plans are created with clear timescale to resolve areas for improvement highlighted.
- c) ensure monitoring of staff practice and children's play and learning experiences is regularly carried out to identify strengths and any areas for improvement.

This is in order to comply with Part 3, Section 7(1) 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 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 requirement was made on 8 April 2025.

Action taken on previous requirement

The manager had created a quality assurance checklist to support a new system to try and improve outcomes for children and staff. However, we found this was still at the early stages and yet to be fully embedded. We suggested the manager create a yearly calendar with key tasks identified that would support their role in quality assurances as the leader of the service.

An action plan with clear tasks and timescales had been created following the inspection, requirements and areas for improvement. We would encourage the manager and team to continue to develop their own improvement plans as the service continues to grow and development.

The manager worked alongside the team to monitor and mentor staff practice. We would encourage the manager to formalise this process with staff to ensure they can identify strengths, areas for improvement and training needs of individual members. This would support the continuous professional development of staff and the quality of service delivery.

Not met

Requirement 6

By 20th June 2025, the provider must ensure that staff have been safely recruited following safe and robust procedures. This is to ensure children are safe and protected from harm. To do this, they must, at a minimum:

- a) Ensure a 'Protection of Vulnerable Group' (PVG) membership or scheme update has been received prior to staff commencing in the service.
- b) two up-to-date references, must be obtained prior to staff starting in the service.
- c) the service, must at all times, follow safe recruitment practices.

This is in order to comply with Part 3, Section 7(1) of the Health, and Care (Staffing)(Scotland) Act 2019. This is to ensure staffing is consistent with the Health and Social Care Standards which state: '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); and 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.25).

This requirement was made on 8 April 2025.

Action taken on previous requirement

We were satisfied with the progress the service had made for this requirement. We have given further details of the action taken under Quality Indicator 4.2 staff recruitment.

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

The manager should improve the medication processes and procedures in the setting. They should review how medication is recorded, stored, administered, and audited. They should refer to the Care Inspectorate's Management of medication in daycare of children and childminding services.

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 8 April 2025.

Action taken since then

We were satisfied with the progress the service had made for this area for improvement. We have given further details of the action taken under Quality Indicator 1.1 nurturing care and support. **This area for improvement has been met.**

Previous area for improvement 2

To ensure children experience high quality play, learning and development opportunities the manager, and staff should at a minimum:

- a) Ensure all staff are skilled in understanding their role in supporting children through meaningful engagement.
- b) Ensure that staff demonstrate an understanding of child development and how to use play to support children's learning and development.
- c) Ensure planning processes are effective to promote children's individual learning.

This is in to ensure care and support is consistent with the Health and Social Care Standard (HSCS) which state that; 'I am supported to achieve my potential in my education and employment if this is right for me'. (HSCS 1.27)

This area for improvement was made on 8 April 2025.

Action taken since then

We were satisfied with the progress the service had made for this area for improvement. We have given further details of the action taken under Quality Indicator 1.3 play and learning and 4.3 staff deployment. **This area for improvement has been met.**

Previous area for improvement 3

To ensure children have regular experiences which supports their curiosity and creativity, the provider should ensure that resources reflect children's current interests and stages of development. This should include, but is not limited to:

- a) Children have opportunities to engage in a range of interesting and stimulating play experiences.
- b) Play spaces are organised and well-equipped with a wide range of toys, resources, and materials.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity, learning and creativity' (HSCS 2.27).

This area for improvement was made on 8 April 2025.

Action taken since then

We were satisfied with the progress the service had made for this area for improvement. We have given further details of the action taken under Quality Indicator 1.3 play and learning and 2.2 children experience high quality facilities. **This area for improvement has been met.**

Previous area for improvement 4

To ensure the quality of children's experiences are improved, the provider should implement robust self-evaluation and improvement planning to cover key areas of practice. This should include, but not be limited to, gathering views of children, parents, and staff to evaluate and improve the out of school care as a whole.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 8 April 2025.

Action taken since then

The manager and team had began to establish a culture of self-evaluation to support the ongoing improvements in the service. The team could reflect on the changes that had been achieved and the impact this had on the outcomes for children in their care. We found this process was still at the early stages and required more time to be fully embedded. A live/ongoing improvement plan should be created to support the service to identify short and long-term goals that will enable the service to continue to grow and develop. **This area for improvement has not been met.**

Previous area for improvement 5

To ensure that children receive responsive care and support, management should make appropriate notifications to the Care Inspectorate when certain events take place. Management should refer to good practice guidance, "Early learning and childcare services: Guidance on records you must keep and notifications you must make" to identify events that require them to notify the Care Inspectorate.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "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 8 April 2025.

Action taken since then

We were satisfied with the progress the service had made for this area for improvement. We have given further details of the action taken under Quality Indicator 3.1 Quality assurances and improvements are well led. **This area for improvement has been met.**

Previous area for improvement 6

To ensure the safety and wellbeing of children the provider, manager and staff should ensure that all staff have appropriate training and skills in core areas of practice. This includes but is not exhaustive of:

- a) Child protection
- b) Food hygiene
- c) Infection control
- d) Playwork Principles

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 practise and follow their professional and organisational codes'. (HSCS 3.14)

This area for improvement was made on 8 April 2025.

Action taken since then

We were satisfied with the progress the service had made for this area for improvement. We have given further details of the action taken under Quality Indicator 4.3 staff deployment. **This area for 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?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	4 - Good
4.2 Staff recruitment	4 - Good
4.3 Staff deployment	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.