

St. Joseph's Out of School Club Day Care of Children

St Joseph's RC Primary School
5 Queens Road
Aberdeen
AB15 4YL

Telephone: 07525854639

Type of inspection:
Unannounced

Completed on:
8 July 2025

Service provided by:
CLICC Ltd.

Service provider number:
SP2003003228

Service no:
CS2014332887

About the service

St. Joseph's Out of School Club operates within St. Joseph's RC Primary School in the centre of Aberdeen. It is registered to provide a care service to a maximum of 56 school aged children. The service is open both before and after school. The club is one of a number of clubs provided by Community Link Childcare (CLICC) throughout Aberdeen city and Aberdeenshire.

The service operates from a newly refurbished dedicated space within the basement level of the school. There is access to a fully enclosed playground. On street parking is available and the service can be accessed by public transport.

About the inspection

This was an unannounced inspection which took place on 2 July 2025 between the hours of 14.40 and 18:10, and 3 July 2025 between the hours of 07:25 and 08:50. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for 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 and parents/carers using the service
- made contact with parents of children who attended
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Children were settled, confident and happily engaged in play experiences.
- Children led their own play through a well-balanced mix of activities and experiences in different rooms and outdoors.
- Children received nurturing care and support from staff who knew them well.
- Parents were welcomed into the setting daily, allowing meaningful, informal chats.
- More regular and focused staff monitoring would support staff to become more skilled and reflect deeper on their practice.
- The club should consider ways to support risky play and enhance staff and children's understanding of risk and keeping themselves safe.

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 positive interactions from staff, which meant they were happy, relaxed, and confident. Staff knew children well and spoke confidently about their personalities and how they were supporting them. Parents told us they had a good relationship with staff caring for their children. One parent said; "Always helpful and flexible to assist with any enquiries. Thoughtful and try to understand each child to better tailor for their needs." Another parent said, "Though I do not know the names of all the staff, [some staff] are always pleasant, helpful and forthcoming with information regarding my [child]." This meant that children's overall wellbeing was being well supported.

Children's care was supported by the use of personal plans. These were being reviewed regularly with parents, which ensured children were receiving care and support that is right for them. Since the last inspection, children's 'All About Me' information had been made easily accessible for staff and was being used regularly to get to know the children. Children who required a care plan had one in place. These highlighted their needs, ongoing support, and strategies to support staff to tailor individual care.

Snack time provided a relaxed, social experience for the children as they sat together with staff, sharing stories about their school day. Some snack had already been prepared ready for children to self-serve, and a snack helper chopped and prepared fruit. This meant children didn't have to wait long for snack. In addition, opportunities were available for children to develop independence and life skills, such as, chopping and pouring. Children helped themselves to water from a dispenser and scraped their own plates. We saw that children and parents had been involved in making improvements around snack, and children used a whiteboard following snack to indicate if they enjoyed the choices on offer. This contributed to children feeling listened to, and was also used to plan future menus.

The setting's policy detailed how they would safely manage the administration of medication. Medication was stored safely in accordance with current best practice and was taken with them when outdoors. Since the last inspection, medication forms were stored with medication and were readily available for reference purposes. Forms were completed in full, which meant all vital information was available to staff, contributing to the children's health and wellbeing.

Quality indicator 1.3: Play and learning

Children had fun and were engaged throughout the inspection. The pace of the session was relaxed and unhurried, and children had opportunities to lead their own play experiences in different rooms. Staff were responsive to children's interests and supported their choice in where they played. We saw children enjoying time in the quiet room engaged in craft activities. One child was interested in 'Sprunki' characters, and went on to draw a picture of these characters which a staff member photocopied for other children to colour in. An activity was then planned following this interest and a variety of resources were made available for children to create 'Sprunki' characters. Many children enjoyed this activity created around this current interest.

Staff interacted positively with children. However, we observed some missed opportunities to further extend play and develop skills. For example, children were playing pool and a younger child wanted to join in. Staff supported older children to include the younger child. However, they missed the opportunity to model or support the younger child to develop their skills, using the cue correctly to hit the balls. Quality assurance processes should be considered to ensure staff are consistently using skilled interactions to develop children's skills and play.

Opportunities to enjoy and develop language, literacy and numeracy skills were evident within children's experiences, and were relevant to their age and stage of development. Children had access to mark making materials which they used well. There was an interest around writing the 'Sprunki' characters names. We saw children enjoy books. The range of games on offer supported numeracy skills such as sorting and counting. Children kept tally scores to indicate if they enjoyed snack. We discussed the benefit of using chalk or whiteboards for children to keep scores in a similar manner for games in the games room. We heard staff modelling good use of vocabulary when talking to children. Experiences such as these enhanced opportunities to develop language, literacy, and numeracy skills.

The club used children's meetings and mind maps to gather children's ideas, which we could see had been taken onboard. For example, when asked about the end of term, children had requested a water fight and we saw this was taking place in the afternoon of the inspection. Activity planners including evaluations were displayed on the wall, which highlighted the children's engagement and supported future planning. A scrap book contained photos of children's experiences. We discussed the children having more ownership of this, including their comments which would also support the planning process. The setting were carrying out observations and setting goals with the children, however, we found these could be more consistent and child friendly. CLICC (Community Link Childcare) had already recognised this and had plans to support changes. Goals could then be used to plan next steps effectively and inform the planning processes, further supporting children to develop life skills and reach their potential.

When asked about the wider community and children told us they enjoyed using the Orchard School playground. The club were trying to make better use of community links. Spec Savers had provided funds to purchase high vis vests and the club had contacted, One Seed Forward - A Community growing initiative, to support them with their planting project. For those attending CLICC holiday club there were more opportunities to explore the local and wider community for example, children were visiting the Science Centre in Dundee. This contributed to children's sense of belonging and supported them to have new opportunities in and out with the setting.

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 high quality facilities

The club ran within the basement of the school, which limited natural light. However, there were small windows which could also be opened for ventilation. We discussed the use of soft lighting as opposed to using all the large strip lights to create a softer, more homely feel. Children's artwork was displayed, providing children with ownership of their setting as well as creating a sense of belonging. Soft furnishings such as cushions and blankets were used in the quiet room providing a cosy space to rest and relax. We discussed bringing some soft furnishings into other rooms to allow children to play comfortably on the floor.

or relax with a book, for example, throughout the available spaces.

The environment had recently been refurbished. The lay out of the club meant children had ample space to explore within the different rooms. Children told us they liked the feel of the different rooms. They said if you wanted a quiet space you could go to the quiet room, but if you wanted to have fun you could go to the games room. They said it was loud, but they expected that and it was fun. We saw that children were confident in moving around the available space to explore their ideas and interests. Since the last inspection, we could see much thought had gone into the layout of resources and what was on offer. Children selected what they wanted to play with from materials on shelves and within storage units. New, real resources had been purchased, including pots and pans for the home corner. The children told us they had enjoyed learning to crochet and were still practising. These were age and stage appropriate, reflected children's interests, and added value to their play.

Staff valued the importance of children being active and ensured they had access to the gym hall, dining hall, or outdoors daily. This enhanced their health and wellbeing, extended their play, and gave them choice in where to play. On the first day of the inspection, it was raining heavily, therefore, in discussion with the children, the club sourced a space within the school for the children to be active. This contributed to children experiencing good quality play and learning opportunities both inside and outdoors.

Systems were in place to support keeping children safe. Risk assessments helped staff to mitigate risk and enhanced children's safety. We discussed how these could be streamlined and spoke about the benefits of risk benefit assessments to support risky play and children's involvement. We suggested the club explore the Care Inspectorate's SIMOA campaign. This would support staff to consider the language they used with children around being safe, and enhance both staff and children's understanding of risk and keeping themselves safe.

Children's safety was promoted through effective practice. Infection prevention and control measures, such as wiping of tables, wearing PPE (Personal Protective Equipment) and hand washing, helped prevent cross contamination. We also discussed the benefits of hand washing after eating. This would further contribute to keeping children safe and well.

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 improvements are led well

The service vision, values and aims had been shared with families attending the club. During our inspection, these were evident as we saw the team were motivated to offer good experiences for children. We suggested that staff could consider ways of making the values of the service more familiar and meaningful to children.

Children and families' views and suggestions about their care and experiences were valued by the club. We could see this had been developed since the last inspection. The club had set up a parents table and wall with information and photos to share with parents. They used 'question of the month' to gather families views, for example, on snack and wall displays. As a result of feedback, the club now plans to share more photos of activities with families. When parents were asked if they were involved in a meaningful way to develop the service, we received a mixed response. We suggested that the club share their 'you said, we

did' approach within the parent's area. This would ensure all parents felt listened to and would create a collaborative approach to improvement.

Staff expressed that they felt supported by their team and management, including the co-ordinator and manager. Staff meetings, monitoring of practice, and support and supervision meetings were in place which supported staff. Allocating time during staff meetings for self-evaluation, such as quizzes, supported staff to be more involved in reflection which enabled them to identify strengths and consider what could be improved. More regular and focused staff monitoring would also support staff to become more skilled and reflect deeper on their practice to bring about improved outcomes for children and families.

The setting had produced a development plan to support improvement and document developments. Engaging with recognised audit tools, such as the quality framework, had allowed them to recognise what they were doing well and identify areas for improvement. We discussed incorporating success criteria into their plan, to support them to evaluate their improvements. The club had already recognised the importance of this and were looking to include this. This would support them to consider whether there was a need for further development or if the outcome had influenced further improvements. Sharing this with families and children would again support everyone to be clear on the setting's focus for improvement.

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 demonstrated genuine warmth, kindness and interest towards the children they cared for. When asked about the most positive aspects of their child's experiences in the club, one parent said; "The club team members are cheerful and highly responsive. My child looks forward going to the OOSC." Another parent said, "The opportunity to interact with other kids in a friendly, safe space." This resulted in children being happy and feeling safe.

We saw that parents were welcomed into the club to drop off and collect their children. Staff told us they had a good relationship with families and enjoyed informal chats with them. Most parents told us they felt welcomed into the club. One parent said, "The staff do chat if there is anything can't fault them, they are lovely." Another parent said, "I can always chat with the staff and make sure my kid feels their needs are addressed. I still feel I am heard but not necessarily actions are directed to the concerns." Access to the club ensured there were daily opportunities for staff to communicate with families and build relationships.

Management recognised the importance of ensuring that the service was appropriately staffed at all times. The deployment of staff was effective, and they were flexible in their approach, communicating well with each other using walkie talkies when in different rooms. Staff moved with children, to support the needs and interests of the children.

Staff were appropriately qualified. They had a good knowledge of child development, play and learning, and were further developing this. Some were qualified and others were working towards gaining relevant qualifications. Staff were committed to their professional development and were able to discuss training they had undertaken and the impact of this on their practice. Staff spoke about how recent training had encouraged them to consider their interactions with children. This had supported them to try new approaches which they had found to be effective. Staff shared their training log with us and we discussed

the benefit on reflecting within this log the impact on outcomes for children.

During the inspection, the service had used relief staff to make sure that the correct number of staff were available to meet the needs of the children. Relief staff told us they were well supported to understand their roles and responsibilities. These staff were part of CLICC's own relief pool and, where possible, the same staff were used to help provide consistency for children.

Robust staff inductions had supported new staff's knowledge and awareness of their role. Effective reflection during induction had supported staff to have a good understanding of their roles, responsibilities, and effective ways of working.

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

In order to support high quality experiences and positive outcomes for children's development, learning, care and support, the provider should ensure that quality assurance and improvement processes are robust and effective to drive forward improvement.

This should include, but is not limited to:

- a) promoting parent and children's participation in the evaluation and development of the service;
- b) continuing to develop how the team self evaluate; and
- c) develop and implement an improvement plan that promotes timely development which focuses on improving outcomes for children.

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

'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 9 January 2025.

Action taken since then

We could see this had been developed since the last inspection. The club were now involving parents and children more in the development of the setting, listening to thoughts and ideas. This was having a positive impact.

Staff meetings, monitoring of practice, and support and supervision meetings were in place which supported staff. Allocating time during staff meetings for self-evaluation, such as quizzes, supported staff to be more involved in reflection, which enabled them to identify strengths and consider what could be improved.

The setting had produced a development plan to support improvement and document developments. Engaging with recognised audit tools, such as the quality framework, had allowed them to recognise what they were doing well and identify areas for improvement.

This area for improvement has been met.

Previous area for improvement 2

To support children's health and wellbeing, the manager and staff should ensure that personal plans accurately identify children's needs and how they will be met.

This should include, but not be limited to:

- a) key information is documented, easily accessible to staff, and clear in its content to ensure that children's individual needs are met; and
- b) children's personal plans are reviewed and updated where required at least every six months, or more frequently if there are changes.

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

'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)

and

'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 24 November 2023.

Action taken since then

Personal plans were being reviewed regularly with parents, which ensured children were receiving care and support that is right for them. Since the last inspection, children's 'All About Me' information had been made easily accessible for staff and was being used regularly to get to know the children.

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?	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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