

J. Puddleducks @ Victoria Street Day Care of Children

162 Victoria Street
Dyce
Aberdeen
AB21 7DN

Telephone: 01224 722 212

Type of inspection:
Unannounced

Completed on:
11 June 2025

Service provided by:
J. Puddleducks Childcare Limited

Service provider number:
SP2004006974

Service no:
CS2008188409

About the service

J. Puddleducks @ Victoria Street is a day care of children service. They are registered to provide care service to a maximum of 85 children aged from 0 to under 13 years at any one time of whom:

- no more than 19 are under 2 years of age
- no more than 27 may be aged 2 years to under 3 years and
- no more than 29 may be of an age not yet attending primary school
- no more than 10 may be of an age to attend primary school to under 13 years at the Breakfast Club.

The service is delivered from premises in a residential area of Dyce, close to local amenities such as shops, parks and schools. Children's care is provided from three rooms divided by age of the children. Children in two of the rooms have direct access to the large outdoor area.

There were up to 49 children present during our inspection visits.

About the inspection

This was an unannounced inspection which took place on 9, 10 and 11 June 2025 between the times of 08:50 and 17:15. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaint 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 and two of their parents/carers
- received 14 completed questionnaires from staff and parents/carers
- spoke with staff and management
- observed practice and children's experiences
- 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 benefitted from warm and nurturing interactions from staff which promoted their wellbeing.
- Children were having fun as they played, the managers should continue to support staff learning in using skilled interactions to support and extend children's play and learning experiences.
- Children were kept safe in a secure environment, the manager and staff should work towards ensuring that the environment is consistently inviting and stimulating for children.
- Quality assurance and self-evaluation processes were in place and being used to identify areas where further development would support positive outcomes for children.
- Staff were deployed to support a balance of skills and experience in each room. Work was being carried out to recruit new staff to reduce the movement of staff between rooms and should be continued.

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?	3 - Adequate
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?

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 benefitted from warm and nurturing interactions from staff which supported their wellbeing. Staff welcomed children into the service and supported them to participate in the activities offered. Children were encouraged and praised during their activities, supporting their confidence and self-esteem. Younger children received cuddles for comfort and reassurance supporting them to feel loved and cared for. All of the parents responding to our request for feedback agreed they were happy with the care their children received. One parent commented, "My child is always happy to go to j. puddleducks" and another said that staff were, "Welcoming and friendly".

When children needed personal care, such as nappy changing, this was carried out discreetly with warm and caring interactions. Children were given time to develop their independence and life skills in activities such as changing into outdoor clothes.

Children enjoyed mealtimes which were relaxed and sociable, providing opportunities to build relationships with staff and peers. When staff were sitting with children they were well supported to make the most of those opportunities. However, at times staff were not focused on children who were eating. For example, when they were supporting other children to come to lunch or carrying out tasks. Staff should work towards ensuring that they are focused on children at all mealtimes.

Staff recognised the importance of sleep for children's wellbeing. Sleep areas were organised to support children to settle and rest. For example, a separate sleep room for younger children and reduced lighting and noise for others. Staff knew how children liked to be settled for sleep and what their home sleep routines were. This supported them in reflecting parents' wishes. When children had to be woken, this was done gently with lots of cuddles and reassurance, promoting the children's wellbeing and sense of security.

Personal plans were being used to promote children's wellbeing and safety. All plans we sampled had sufficient information to identify children's needs. The method of recording the information was not always consistent. Where a specific need had been identified the strategies to support the child were recorded. The quality of this information was inconsistent. The success of the strategies of support was not yet being evaluated. Staff should work towards a consistent quality of recording and evaluating strategies used to support children. This will promote access to information and a shared approach to meeting children's needs.

Plans were regularly reviewed with parents providing opportunities for information sharing. Most parents agreed that they were involved in their child's care but a few told us they felt communication could be better. One parent commented that they had been able to keep staff informed about their child's needs and another that they were able to discuss their child's experiences every day. However, one commented they felt disappointed as there was a lack of information about their child's time in nursery.

Children's health was promoted through the process of storing and administering medication. We asked the

manager to use this same process for the storage of medicated creams. Children were kept safe as the staff showed a good understanding of their role in identifying, recording and referring any concerns.

Quality Indicator 1.3 - Play and learning

Children were having fun and were engaged in their play at most times during the inspection visits. The quality of children's engagement improved when staff had time to fully prepare the rooms and resources for the planned activities. At these times children were confident in accessing different areas and resources available to them which supported their choice and ability to lead their own play.

Staff were responsive to children and supported their spontaneous play experiences. Experienced staff were now more confident in using skilled interactions to support children's learning through play. However, less experienced staff were yet to develop these skills. There were times when opportunities to extend children's play were missed. For example, when children were discussing worms and bugs, staff did not recognise opportunities to involve children in finding information or to supply extra resources. Managers should support all staff in developing skills and confidence in this area. A previous area for improvement has been carried forward. **(See the section 'What the service has done to meet any areas for improvement' further in the report.)**

Observations of children's experiences were recorded on a digital format which meant these could easily be shared with parents. The quality of some of these had improved since the last inspection with clear links to learning from children's experiences. This was not yet consistent for all observations. Some staff were more confident in identifying next steps to support children's progression. However, the strategies to support children to reach these achievements were not always detailed enough to promote a consistent approach by all staff. Staff should further develop their skills in observations being used to plan activities to promote children's learning and progression. A system for tracking children's learning and progression had been introduced. This was not yet being used effectively to support staff in identifying where there were gaps. Managers should support staff in developing this until it is embedded in practice and leading to better outcomes for children.

Children had access to a variety of books in different areas of the playrooms which supported their early literacy skills. These were further promoted by spontaneous story telling for individuals and small groups of children. Staff were supporting children to identify sounds, promoting the development of language. Children were able to participate in reading and mark making activities such as drawing and painting indoors and work was underway to improve access to this outdoors.

How good is our setting?

3 - Adequate

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

Quality Indicator 2.2 - Children experience high quality facilities

Soft furnishing such as rugs, cushions and seating were used in all rooms to promote children's comfort and a homely environment. The rooms had plenty of ventilation and natural light to support children's health and wellbeing.

Indoor and outdoor environments and resources were developmentally appropriate for children supporting their safety and engagement. The resources reflected children's current interests such as scissors and boxes for older children to cut and use in their play. Some resources were not consistently presented in a

way that supported children to use them appropriately. For example, some accessories needed for the activity were missing. Some areas of the environment did not appear inviting to children. In one case this was due to adult resources such as notebooks and files being left on chairs and in another resources such as paper and pens scattered around the ground. The staff were responsive in changing these areas when they were aware of issues. They should now work towards ensuring that all areas are routinely well cared for and maintained to support children in their play. **(See area for improvement 1.)**

Toddlers and preschool children could access the large enclosed outdoor play area directly from their rooms. This supported their choice in where to play and their health through daily access to the outdoors. Resources in the outdoor area encouraged more physical and explorative play. We suggested that this could be further developed to support children's play and learning. For example, ensuring things such as magnifying glasses and measuring sticks or tapes being available.

Risk assessments had been recorded for a variety of areas and activities. While most of these were detailed enough to support staff in keeping children safe a few would benefit from being expanded. Children's safety was promoted as staff showed a good awareness of where children were at all times. Regular headcounts supported this. Staff discussed safety with children naturally, often asking them if a particular action was safe. This supported children's awareness of how to manage their own safety. Further involvement of children in risk assessments and checks would increase these opportunities.

Children's health was supported through procedures for the control of infection. This included staff wearing gloves and aprons at appropriate times. Children were encouraged to wash their hands before and after eating but not all children did so effectively. Some staff were confident in encouraging this and they should share this good practice until it is embedded.

Areas for improvement

1. In order to promote children's wellbeing and engagement, the manager and staff should consider ways to ensure that the environment is well organised and inviting for children's play at all times of the day.

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

'I experience and environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

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 improvement are led well

A statement of the vision, values and aims for the setting was shared with parents and staff. This recognised the ways that the service aimed to meet the needs of children. Managers should ensure that parents, staff and children are fully involved in regular evaluation of this to ensure that the service continues to meet those goals.

Most parents agreed that they and their children were involved in developing the service. They commented

that they, "Have opportunities to voice opinions and discuss things with staff" and "We haven't been involved in any setting developments but I'm certain that if there was we would be made aware". However, a few parents told us that communication could be better, with one commenting, "Very little communication recently. There used to be monthly updates and we could issue some concerns we may have but that hasn't happened recently". The managers should look at ways to ensure all parents are fully informed and involved in developing the service.

There had been some work done to involve children in the evaluation of the service including mind maps which noted comments on subjects such as snack menus. The staff and managers should continue to develop systems to involve children in the development of the service in meaningful ways.

A quality assurance calendar had been updated and had been in place since January 2024. A change in the management structure of the service had had a positive impact in creating a more realistic schedule of monitoring and improvement goals for the setting. This along with planned audit work supported the ongoing self-evaluation of the service and involved staff at all levels.

Self-evaluation and reflection alongside the quality assurance processes had highlighted areas for further development. Currently these included staff training and deployment, planning for children's play and learning and the environment. An improvement plan with actions and timescales was in place but was not consistently supporting progression on the developments. Ensuring regular reviews and evaluations of change were recorded would aid in identifying where there may be barriers and finding solutions to overcome these.

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

There was enough staff within each room to meet the minimum guideline ratios. However, when agency staff were used to increase the numbers, this had a positive impact on children's experiences as staff were better able to focus on the children. Recruitment is currently underway and managers are confident that the reliance on agency staff will reduce once new staff are in post.

Work had been done to promote a balance of skills and experience within each of the playrooms which had a positive impact on children's experiences. However, it also increased the movement of staff between rooms. The managers should look at ways to minimise the movement of staff between rooms as much as possible. This will support the building of relationships with families and support children's attachments.

Most parents told us they felt they had a good relationship with staff with one commenting that, "They are always friendly approachable and smiling" and another, "Open always engaging and willing to listen and general interest as to home life. Offer an ear to listen to which is welcomed". These relationships supported staff knowledge of children which promoted positive interactions. Staff made time to talk to parents when they collected their children. Information was also shared throughout the day when appropriate.

Staff were proactive and communicated well with each other throughout most of the day. On the second day of inspection, staff used communication better to reduce the times that tasks took them away from

children. Children benefitted from staff who were working well as a team. New staff told us that they felt welcomed and supported to form working relationships quickly. This was supported by an induction process which helped staff become confident in their role.

The managers were reinstating regular individual meetings with staff. This helped them identify where learning or support was needed, promoting staff confidence and professional development.

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 consistently promote children's overall wellbeing, personal plans should be developed until they all contain sufficient information on children's needs and detail strategies on how they will be met.

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).

This area for improvement was made on 8 June 2023.

Action taken since then

All plans sampled had sufficient information to identify children's needs and promote their safety and wellbeing. In some, the way information was recorded was not consistent, it would be beneficial to have a consistent approach to ease access to information and promote a holistic approach to children's care.

Some care plans sampled had information on strategies being used to support children. The quality of this information varied as did how it was recorded. Work should be continued to sustain a consistent format and quality of information.

This area for improvement has been met.

Previous area for improvement 2

In order to promote progression in children's learning and development, the manager should ensure that all staff have sufficient skills and understanding of children's learning and development. This will include increasing competence and confidence in skilled interactions to extend play and learning.

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

'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

This area for improvement was made on 8 June 2023.

Action taken since then

There had been progress in this area. We observed some staff using interactions to support children's learning through play. However, some staff were not confident in using skilled interactions and there were times when staff missed opportunities to extend children's experiences and learning.

This area for improvement has not been met.

Previous area for improvement 3

In order to support positive attachments for children and consistent good quality care, the provider should ensure that the deployment of staff promotes a good balance of skilled and experienced staff in the playrooms.

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

'I am supported and cared for by people that I know so that I experience consistency and continuity' (HSCS 4.16).

This area for improvement was made on 8 June 2023.

Action taken since then

The balance of skills and experience of staff in each room had improved as senior staff were considering where best to place staff to support this.

This area for improvement has been met.

Previous area for improvement 4

In order to promote safe and high quality care for children the provider must ensure that systems are in place to support staff in developing knowledge and understanding of their role and to promote staff wellbeing.

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

'I experience stability in my care and support from people who know my needs, choices and wishes even if there are changes in the service or organisation' (HSCS 4.15).

This area for improvement was made on 25 June 2024.

Action taken since then

Staff told us they felt supported by management and that they were confident in approaching the manager and provider if further support was necessary. Staff were able to talk confidently about recent training courses and how this had impacted their practice.

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?	3 - Adequate
1.1 Nurturing care and support	4 - Good
1.3 Play and learning	3 - Adequate

How good is our setting?	3 - Adequate
2.2 Children experience high quality facilities	3 - Adequate

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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