

Happitots Day Nursery - Bishopbriggs Day Care of Children

28 Colston Drive
Bishopbriggs
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Telephone: 01417 724 708

Type of inspection:
Unannounced

Completed on:
15 May 2025

Service provided by:
Bertram Nurseries Limited

Service provider number:
SP2003002955

Service no:
CS2003003685

About the service

Happitots Day Nursery - Bishopbriggs provide a care service to a maximum of 93 children not yet attending primary school at any one time within the following age ranges:

- no more than 15 are aged under one year;
- no more than 12 are aged one year to under two years;
- no more than 20 are aged two years to under three years;
- no more than 46 are aged three years to those not yet attending primary school full time.

At the time of our inspection, 98 children were registered with the service.

The service operates from a detached villa in the town of Bishopbriggs, East Dunbartonshire. The two storey building comprises six playrooms, children's changing and toilet facilities, a kitchen, office and staff facilities. There are enclosed outdoor play areas to offer children opportunities for fresh air and active play and learning. The service is close to local shops, schools and amenities.

About the inspection

This was an unannounced inspection which took place on 13 and 15 May 2025. 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 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
- issued an electronic questionnaire to families using the service and received 14 responses
- spoke with 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 the service supports 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.

Key messages

- Children benefitted from kind and caring interactions with staff.
- Children were having fun and were involved in initiating their own play and learning.
- A welcoming environment promoted an ethos of respect where positive relationships with parents supported partnership working.
- Quality assurance and self-evaluation processes had improved which meant positive outcomes for families were promoted.
- Processes for observing children, planning for their interests and assessing their progress over time should be improved.
- Staff deployment and positioning across the day should be reviewed to ensure consistent supervision that supports children's safety.

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?	4 - Good
How good is our staff team?	3 - Adequate

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 evaluation of adequate. Where strengths just outweighed weaknesses.

Quality Indicator 1.1: Nurturing care and support

Children's overall wellbeing was supported by kind and caring staff who were calm in their approach and interactions with children. This helped children to manage their emotions, promoted friendships and built positive relationships. One parent told us, "Staff care about the wellbeing of my child."

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; "Staff are friendly and have a good bond with my child." Families were warmly welcomed into the service at drop off and collection times and planned approaches to involve them in their child's care included a recent parents evening, monthly newsletters and stay and play sessions. This meant children benefitted from staff working in partnership with parents to meet their daily care needs and share learning between nursery and home.

The manager had introduced a new format for personal planning and staff had responded positively to this change. Staff gathered information from families to support their understanding of each child's health, welfare and safety needs. This included individual preferences and home routines. Where children required some additional support, positive working relationships had been established with external agencies. The manager should continue with their plans to extend monitoring arrangements to include all plans as this should ensure a consistent approach to identifying individual support strategies. This should ensure all children receive the right support at the right time.

Meals were homemade, 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 were reflective of children's individual routines. Children were settled to sleep and comforted with soothers and transitional objects from home. This meant that children's emotional security and wellbeing was supported by sensitive sleep arrangements.

Quality Indicator 1.3: Play and Learning

Children had fun throughout the 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.

Improvements had been made to children's indoor play environments, and as a result child lead play opportunities had improved. Whilst we recognise these improvements, further support was needed to develop staffs confidence and skills to plan and facilitate a balance of child led responsive and intentional planned experiences that met children's needs. We observed that some planned learning experiences, creative and sensory play were only available for short periods of time which limited children's opportunities to revisit and consolidate learning. Further training to support staffs observations of children and how to

plan for their ideas and interests would ensure cross curricular learning which offered breadth, depth and challenge, supporting children's progression (area for improvement 1).

Staff used an online application called 'learning journals' to communicate with families, sharing nursery updates and general information. While some information about children's play moments was recorded, the quality of observations varied and most lacked analysis of learning. A more focused and consistent approach was needed to support children's progression over time. Parents told us they would like; "More regular updates on the app" and "It would be good to have some discussions focussed on progress and development, maybe through the app." Ensuring all families receive regular updates would support them to feel included in their child's learning and development.

Whilst some children enjoyed play outdoors that supported their physical development, this was not consistently provided for all children. The manager was working with staff to involve them in developing outdoor play spaces and had planned some training for staff in providing quality play outdoors. The manager should continue to monitor children's opportunities for outdoor learning to ensure this is consistently available. We made an area for improvement about this at the last inspection. This area for improvement had not been met and remains in place.

Areas for improvement

1. The provider and management team should ensure staff receive training and on-going support to help them to undertake high-quality observations of children through play. This should support staff to ensure children's ideas, wishes and interests are used to inform planned play and learning experiences and are evident within the observation, assessment and planning cycle. This will support children to progress and reach their full potential.

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

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

Improvements had been made to the boundary fencing and perimeter gates to ensure children's safety. The secure door entry system had been upgraded and all families were using one main entrance door to access playrooms. Systems were in place to account for children's whereabouts, including attendance registers, head counts and whiteboards. These processes ensured children's safety.

Children benefitted from a welcoming ethos. Children's photographs and artwork were on display throughout the service and almost all children had a designated space to store their personal items, demonstrating to them that they were valued. One parent who responded to our questionnaire expressed concerns that after some months attending the service their child did not have an allocated peg space. Staff should ensure this is actioned promptly for all new children at enrolment or for children transitioning between playrooms to support their sense of belonging.

Children experienced a clean, homely and comfortable environment which promoted their overall wellbeing. Room temperature and ventilation mostly supported children's comfort. We found that the 2-3 playroom and upstairs 3-5 playrooms became very hot for children at key times of the day. We shared our observations with the manager and fans were sourced promptly and a maintenance contractor visited the service later that day. The manager and staff should continue with their plans to ensure all playrooms have thermometers to enable them review the temperature across the day and take action if needed to support the comfort of children and staff.

Improvements had been made to the layout and resources within all playrooms to encourage children's self chosen play. Self-selection areas were added to play zones and some areas were equipped with natural, open-ended materials. These are play items that children can use in various ways to support their creativity that do not have a predetermined outcome. As a result, children were having fun. The recent introduction of planting offered children opportunities to learn life skills. One parent spoke positively of this stating, "I love how the children have been actively involved in planting in the garden and getting involved in improving the setting". The staff team should continue to build on the progress they are making to provide high-quality play and learning environments.

During our previous inspection we identified that for children attending the 3-5 playrooms, there was not an appropriate changing space to support children's personal care routines. This meant children's comfort, privacy and dignity could be compromised. We made an area for improvement about this at the last inspection. This area for improvement had not been met and remains in place.

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 succession of changes to the senior leadership team had at times led to uncertainty for families. The current manager was appointed in October 2024 and whilst some parents expressed concerns that the leadership remained inconsistent, some spoke positively of the current team. Comments made included; "The current managers have a clear passion to develop and support the nursery and are an asset to the nursery. The nursery has improved significantly under their leadership." During our inspection the manager demonstrated their commitment to the service and to supporting outcomes for children.

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

The service improvement plan highlighted priorities for the service, which aligned with the findings from our previous inspection. The manager was making good progress with the identified areas which demonstrated capacity to lead improvements. As planned, they should continue to work towards meeting the two unmet areas for improvement from their last inspection and consider the two additional areas for improvement contained within this inspection report, whilst involving staff, children and families in these processes to support sustainable improvements to be made.

Overall, quality assurance processes were in place and enabled the manager to audit, assess, and monitor the quality of the service. Effective systems had been further developed since the last inspection and were positively impacting on children's experiences and outcomes. For example, audits for safe storage and

administration of medication were positively supporting children's wellbeing and environmental audits had informed new play resources purchased to support children's play and learning. Where audits and monitoring had been undertaken, staff had been given constructive feedback in areas of practice to support consistency. This was beginning to improve confidence and skills within the team and supported the shared vision and expectations of delivering of a high-quality service for children and families.

We observed a planned fire drill being undertaken and children were supported to exit the premises promptly. We observed that the muster point for children to gather was within close proximity to the main building. In addition, one fire door remained closed and locked by a single bolt as it was risk assessed that this did not delay the evacuation process. We asked the manager to contact Scottish Fire and Rescue Services to review these measures and ensure they fully support children's safety.

How good is our staff team?

3 - Adequate

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

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 relationships formed with staff. Comments included, "The staff are fantastic" and "The relationship and bond I see that my child has with staff is a positive of the nursery." Staff worked well together, and were respectful and considerate in their interactions with each other, children and families. As a result, an ethos of respect was fostered.

Whilst we recognised that there were sufficient numbers of staff in place, the deployment of staff at times key times throughout the day impacted children's safety through lack of supervision and the quality of their experiences. Whilst on the whole children were supervised there were areas of the service where staff needed to be more vigilant and consider their positioning. For example, we observed occasions where children attending the playrooms upstairs were not always supervised by an adult as staff left the areas they were deployed to. Also, during outdoor play staff were not prepared or well equipped to support children's play experiences which meant they often returned indoors reducing supervision outdoors. We shared our observations with the manager who agreed to monitor staff deployment and positioning to ensure children's safety at all times (area for improvement 1).

Staff told us they felt professionally and personally supported by the manager. 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.

Overall, the service's policies and procedures helped keep children safe and protected. Staff had undertaken in-house safeguarding and external protection training to support children's wellbeing and safety.

Areas for improvement

1. The provider and manager should ensure planning for staff deployment consistently promotes positive outcomes for children. Staff positioning throughout the day should be monitored to ensure effective supervision support children's safety.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15).

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 and ensure they receive care and support that is right for them, the management team and staff should ensure children's personal plans clearly set out individual health, welfare and safety needs and how they will be met.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 27 November 2024.

Action taken since then

Personal plans were in place for all children attending the setting and they outlined individual children's health, welfare and safety needs and how they would be met. Monitoring of personal plans had been introduced and should continue to be imbedded to ensure consistency in staff recordings.

This area for improvement was met.

Previous area for improvement 2

To support children's wellbeing, learning and development, the provider and management team should improve the quality of children's play and learning experiences. To achieve this, action taken should include, but is not limited to, developing staff skills and knowledge of child development and reviewing the pace of the day to ensure a balance of child initiated and adult supported play experiences, that supports children's curiosity, and creativity.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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) and '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 27 November 2024.

Action taken since then

New furniture items and play resources had been added to all playrooms throughout the service and all staff had engaged in professional learning to increase their knowledge of child development. This had resulted in improvements to the balance of child initiated and adult supported play experiences. Children were mostly engaged in play for periods of time across the day and overall the pace of the day had improved to support children's security and wellbeing.

There were some inconsistencies in the quality of play experiences and provocations offered to children. The manager's monitoring processes had identified this and further training for staff was planned for to ensure consistency for all children.

This area for improvement was met.

Previous area for improvement 3

To support children's wellbeing, management and staff should ensure all children should have routine daily access to stimulating outdoor play. Staff should recognise that some children have a preference for learning outdoors and should minimise the barriers for them accessing outdoor play, including play and learning experiences beyond the setting.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'As a child, I play outdoors every day and regularly explore a natural environment.' (HSCS 1.32).

This area for improvement was made on 27 November 2024.

Action taken since then

During our inspection not all children had access to outdoors. We reviewed documentation for children accessing outdoors and monitoring records which showed that staff were not always supporting children to access play and learning experiences outdoors and within their wider community.

Whilst we recognise that the addition of a new baby garden supported younger children's wellbeing, further improvements were needed to develop the quality of outdoor play and learning experiences for older children. The manager was aware of this and had an outdoor action plan in place. They were working to make improvements within the garden available for children aged 2-5 years old and had started to purchase resources including those to support children's physical development.

This area for improvement was not met.

Previous area for improvement 4

To support children's safety, the management team should implement a procedure for checking external gates are closed when children have access outdoors and confirming children's attendance is accurately recorded and emergency exits are not locked to ensure all children are accounted for and can evacuate the premise safely in the event of an emergency.

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 5.24).

This area for improvement was made on 27 November 2024.

Action taken since then

The manager had reviewed the procedures for families accessing the service and had made changes to ensure families used one entrance. This meant that the risk of external gates being left open were reduced. We found that staff safely registered children's arrival and departure times and used white boards to record how many children were present. This meant that staff and children could evacuate the premise safely in the event of an emergency.

This area for improvement was met.

Previous area for improvement 5

To support children's safety and wellbeing, the provider and management team should ensure children are cared for within safe, clean and hygienic environments. In order to achieve this, action taken should include but is not limited to; implementing procedures to audit environments prior to children's arrival at the setting and making the necessary improvements to enable children attending the 3-5 playroom to have support with nappy changing routines within an environment that is well equipped and promotes their privacy and dignity.

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 5.24) and 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected.' (HSCS 1.4).

This area for improvement was made on 27 November 2024.

Action taken since then

Improvements had been made to ensure children were cared for in clean and hygienic environments. Playroom clutter had reduced and most play zones were sufficiently resourced.

Whilst we recognise that as an interim measure, the manager had implemented a risk assessment and use of walkie-talkies to improve children's privacy, overall, the changing facilities for children attending the 3-5 playroom had not been improved. This meant children's comfort, privacy and dignity was not fully supported. We reviewed communication between the manager and the provider group. The manager was keen to have improvements implemented but was awaiting a response from the provider's health and safety department. The provider should ensure that there are sufficient changing facilities for all children.

This area for improvement was not met.

Previous area for improvement 6

To provide a high-quality service that meets the needs of children and families, the management team should ensure that quality assurance processes are improved, imbedded and impact positively on outcomes for children. To achieve this, action taken should include, but is not limited to; monitoring the quality of service provision, undertaking self-evaluation and developing a service improvement plan which identifies key priorities for improvement.

This is 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 area for improvement was made on 27 November 2024.

Action taken since then

The manager had worked hard to develop and implement quality assurance processes and these were positively impacting on outcomes for children and their families. The manager should continue with their plans to fully imbed quality assurance processes in to practice and to promote a culture of leadership at all levels by further involving staff.

This area for improvement was met.

Previous area for improvement 7

To ensure children's safety and promote high-quality care and support, the provider and management team should ensure that all staff have access to a training programme to support them in their role. Priority should be given to staff having updated training in child protection.

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 understanding of their responsibilities.' (HSCS 3.20)

This area for improvement was made on 27 November 2024.

Action taken since then

The manager and staff team had undertaken a variety of professional learning and self directed study to support them in their role. This included child protection. Staff were beginning to become reflective of how training supported their practice and contributed to positive outcomes for children and families.

This area for improvement was 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?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	3 - Adequate
4.3 Staff deployment	3 - Adequate

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