

Thrive Childcare and Education Happitots Cove Bay Day Care of Children

Cove Road
Cove Bay
Aberdeen
AB12 3NX

Telephone: 01224 249 234

Type of inspection:
Unannounced

Completed on:
4 June 2025

Service provided by:
Bertram Nurseries Limited

Service provider number:
SP2003002955

Service no:
CS2008180905

About the service

Thrive Childcare and Education Happitots Cove Bay is registered to provide a daycare of children service to a maximum of 63 children at any one time aged between birth and entry into full time primary school.

The service is based in the residential area of Cove Bay, Aberdeen. Children have access to a number of playrooms. Babies and children up to the age of two years are based in the Sunbeams room and children aged two to three years are in the Moonbeams room. Children aged three to five are based in the Shining Stars room. There are garden spaces to the rear of the property. Children in the Sunbeams room also use the front garden.

The service is close to a local park and other amenities.

About the inspection

This was an unannounced inspection which took place on 3 June 2025 between 10:20 and 18:15 and 4 June 2025 between 08:50 and 14:15. 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 information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spent time with children using the service
- spoke with five parents/carers
- received 27 completed questionnaires from parents/carers and staff
- 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 experienced warm and caring interactions, helping them to feel settled and secure.
- Children's play and learning experiences had improved. Further work was needed to ensure play experiences were consistent and challenging for all children.
- The environment was comfortable and resources were well-maintained.
- Quality assurance and self-evaluation had resulted in changes which promoted positive outcomes for families. One requirement and three areas for improvement from the previous inspection had been met.
- Staff were not always effectively deployed to meet the changing play and personal needs of children throughout the day.
- Management and staff were committed to the continued development of the service.

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 good and adequate, with an overall evaluation of adequate. Whilst we identified some strengths, these only just outweighed weaknesses.

Quality indicator 1.1: Nurturing care and support

Children experienced warm, nurturing and caring approaches from staff, which supported their overall wellbeing. Children were given praise, reassurance and physical comfort when needed. This supported them to feel settled and secure.

Children and their families were warmly welcomed into the service. This supported sharing of information and positive relationships. Parents commented positively about the care their child received. One parent commented, "Staff are warm and friendly every morning we come into nursery they are always happy to see my children. They know my children's needs really well." Another parent shared, "My child loves all the staff and friends they have made. It's always very welcoming."

Children enjoyed relaxed and unhurried snack and mealtimes. Staff sat with children as they ate, promoting conversation and providing effective supervision to keep them safe. Children were encouraged to be independent and overall were supported appropriately for their age and abilities. Children's allergies and food preferences were well catered for through staff awareness of any allergies or dietary requirements. This kept children safe and well.

Fresh water was available throughout the day and children were reminded to drink regularly to support hydration.

Personal plans were in place for all children. Children were cared for by staff who knew them well and families were included in developing and reviewing plans to ensure information was current and relevant. Overall, children's preferences were followed, helping to support a continuity of care between home and the setting. Where children required some additional support, positive working relationships had been established with external agencies. This helped develop support plans to guide staff on the strategies needed to support children's development and wellbeing. However, some plans did not hold enough information to fully support staff to provide individualised care. This raised the potential for inconsistent care and support. This was an area for improvement at the previous inspection which has been continued (see area for improvement 4 under What the service has done to meet any areas for improvement we made at or since the last inspection).

Children's health was supported through appropriate systems for medication being administered safely. Staff were aware of children's health needs and knew the signs, symptoms and actions to take where a child may require medication. Medication forms contained accurate information and were regularly reviewed with parents. This contributed to keeping children safe and well.

Quality indicator 1.3: Play and learning

Children's play and learning experiences had improved and most children were engaged and busy at play. Most play spaces were well-resourced, and children could self-select toys and materials to support their play. Older children participated in experiences including making sandcastles, building models with construction materials, playdough, arts and crafts and dressing up. There were opportunities for babies' sensory development such as through water play and smelling herbs. Play experiences promoted opportunities for children to play together, investigate and develop communication skills.

Most children were encouraged to follow their interests and curiosities and lead their play experiences. However, there were times when the routine of the day interrupted their engagement. In one playroom, the play space was divided into an area for sleeping and playing after lunch. This meant that children's access to sensory play was restricted at times and their opportunities to play were limited. We discussed this with management who agreed to review the sleeping arrangements.

Most staff interactions were supportive and helped to promote a positive atmosphere. Some staff effectively extended and built on children's play and learning. However, a few staff did not always recognise or respond to children's cues for help. There were a few missed opportunities when skilled and effective questioning was not used well to extend children's curiosity and problem solving skills. An area for improvement made at the previous inspection has been continued to support the service's approach to children's learning (see area for improvement 1 under What the service has done to meet any areas for improvement we made at or since the last inspection).

Most children were supported with regular free flow play to outdoors. This supported their physical development and wellbeing. The outdoor environment supported their choice and interests. For example, older children enjoyed running, digging and hunting for insects. Younger children enjoyed playing games with staff and exploring sensory play. On the first day of inspection for one playroom, access to outdoors was not offered. This was discussed with the manager, and on the second day of inspection all children accessed outdoor play. The manager should continue to monitor children's opportunities for outdoor learning to ensure this is consistently available.

Ongoing improvements to planning approaches contributed to improve children's experiences to support children's learning. Online journals shared with parents/carers informed them about their children's learning experiences and development journey. Some observations were beginning to highlight children's skills development and progress; however, this was not yet consistent. Recorded next steps did not always show significant learning or how children would make further progress. This meant not all children were sufficiently challenged with a range of high quality learning experiences relevant for their stage of development. One parent commented, "I would love to see more updates on the app." Another parent said, "I would like to have more updates on learning and how you could help at home."

Opportunities for children to develop their skills in literacy and numeracy were available within some of the play experiences on offer. For example, some children enjoyed using the art and craft area to explore mark making and joined in with rhymes and dancing. Staff supported early communication and language skills by singing songs and reading stories. The use of environmental print such as magazines and cookery books, posters and name cards provided opportunities for children to recognise and become familiar with letters.

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.

Children were cared for in an environment which was clean and welcoming. Children's health and wellbeing was supported as there was plenty of ventilation and natural light in the playrooms. There were some comfortable and cosy spaces for children to rest and relax. Child-sized couches, rugs and cushions, created homely areas. Quiet dens indoors and outdoors had been added to provide additional spaces where children could play or rest during a busy nursery day. These could be increased and further developed. For example, story corners could have adult-size soft seating for cuddling up on to share stories together. The manager agreed this was an area of ongoing development.

Since the previous inspection, a significant amount of work had been done to improve the quality of the environment. Children's engagement and safety was supported as the resources were in good condition and developmentally appropriate. Children had fun playing in the home corner, cooking and dressing up. The addition of interesting real life resources, such as crockery, kitchen utensils and cookery books, helped sustain their play and extend their ideas. For older children, a well-stocked art and craft area and some natural, open ended resources supported children's curiosity and creativity. Management and staff had begun evaluating some play spaces to ensure they were inviting and easy for children to use. They should continue with this work to further develop play areas for children to ensure they meet their ongoing needs. Parents and staff spoke positively about changes made to the environment. One parent told us, "The nursery has lots of improvements since the inspection. Lots of new toys inside and outdoors."

There was a new system in place to monitor the maintenance and repair of equipment and work was ongoing. Overall, resources and play areas were well-maintained. The nursery was safe and secure with controlled entry and enclosed outdoor areas. One parent commented, "I can see the maintenance team on-site to resolve any issues." Another parent commented, "The security measures at the front of the nursery are very reassuring. I know my child is safe and protected from harm while at nursery."

Infection prevention and control practices contributed towards a safe and clean environment. This included regular cleaning of surfaces and effective hand hygiene from staff. They washed their hands frequently and at appropriate times. Children were encouraged to wash their hands and were well supported to understand the reasons for this through songs and discussion. This supported children to stay safe and healthy.

Children's experiences were enhanced through links with the community and visits to places of interest. These included visits to the local park, library, car wash and harbour. These opportunities promoted children's health and wellbeing and connection with the local community. The service recognised the importance of community based opportunities and was looking to develop these further.

Children's personal information was stored securely to ensure families' privacy and confidentiality.

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.

The service had vision, values and aims which reflected the wider provider group and supported staff and families to understand what to expect from the service. The manager and staff should ensure the current vision, values and aims are revisited so that they reflect the needs and views of current children, families and staff. This would support all stakeholders to feel valued and included.

Families were welcomed into the setting which helped support engagement and partnerships. Children and families' views were actively sought through discussions, questionnaires and parent partnership meetings. A parent commented, "We are always encouraged to be involved. The nursery staff communicate and are open to feedback." Another parent shared, "We have been invited to attend parent partnership meetings where many topics surrounding the nursery are discussed." There was some evidence of suggestions and ideas being taken forward to support improvement. This was fed back to parents to show the impact their voices had. This supported communication and partnership working.

A quality assurance calendar kept management and staff on track with the monitoring and evaluation of the service, supporting the improvement agenda. Regular audits were completed and included, the environment, mealtime experience, medication and personal plans. Some of these had been successful in supporting improvements for children. For example, improved mealtime experiences and play spaces for children. Further work was needed to ensure monitoring of practice and deployment was consistent to support improvements. For example, the manager should review deployment within specific playrooms and for busier times of the day to ensure children's needs are being consistently and sensitively met.

Positive experiences for children were supported by a realistic, relevant and achievable improvement plan. This included an action plan of key priorities identified at the previous inspection. An improvement floorbook provided a visual and assessable way of showing the improvements that had been made. A positive ethos helped to ensure that staff were working towards the same goals and progress was seen to be contributing to improved experiences for children. Leaders were in the early stages of using improvement tools to support staff to trial changes, evaluate the service and identify areas for improvement. They should continue to develop systems to help staff reflect on practice, to promote positive outcomes for children and families.

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses. While the strengths had a positive impact, key areas need to improve.

Staff were kind and had developed positive relationships with the children and families in their care. Parents described staff as "friendly and welcoming." One parent shared, "I can speak to staff about anything and I know they genuinely care about my child." This approach promoted positive relationships and communication with children and their families.

Staff were flexible and moved between rooms or areas when required. Staff appeared to work well together and communication had improved since the previous inspection. The use of walkie talkies supported staff to remain in contact with each other to meet the needs of children.

There were sufficient staff on duty to meet the required staff to child ratio. However, staff deployment was not always effective to meet the individual needs of children. At times, some staff were task focussed, as a result, outdoor play was restricted, learning opportunities were missed and some children lacked the support they needed. Staff deployment should be effectively managed to ensure children's needs are consistently met.

Some parents told us they did not think there was always enough staff in this service to meet their children's needs. Parent comments included, "Rooms are often put together when there's not enough staff", "Breakfast is normally in a different room to where [my child] is during the day due to staffing and pick up is also in a different room to where [my child] is during the day, confusing for child sometimes" and "There has been a turnover in staff recently which has caused concern." While others told us, "There are always lots of staff when we attend" and "There is always a high staff presence when I drop off." The provider should consider this feedback and review the approach to staffing and deployment to ensure it is effective, sensitive and consistent.

Children were supported by a range of staff with a mix of skills and experience. Staff told us they felt supported by colleagues and the leadership team. They felt comfortable to raise concerns or ask for support if required. Team and individual staff meetings with management supported communication and helped provide direction, support and training opportunities.

Staff spoke to us positively about training opportunities attended. These included schematic play and supporting children's sensory needs. This was beginning to impact on practice and improve outcomes for children. While progress had been made, some gaps remained in staff practice. For example, in relation to deployment, meeting learning needs and supporting children's development and progress. As a result, an area for improvement made at the previous inspection has been continued (see area for improvement 5 under What the service has done to meet any areas for improvement we made at or since the last inspection).

Children's safety was promoted through staff's understanding of their role in identifying, recording and reporting any safeguarding concerns. Staff attended child protection training and a policy was in place to support staff in the processes should they identify a concern.

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

Requirements

Requirement 1

By 25 October 2024, to ensure children experience consistently positive care, play and learning opportunities, the provider must develop quality assurance systems that promote improved outcomes.

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

- a) Develop and implement an improvement plan that addresses weaknesses, while building on current strengths.
- b) Introduce and continue to develop quality assurance processes that effectively promote children's health, safety and wellbeing.
- c) Improve opportunities for the staff and management to reflect and learn both individually and as a team to enhance their understanding and delivery of high quality care, play and learning

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:

'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 18 July 2024.

Action taken on previous requirement

Regular audits were completed and included the environment, mealtime experiences, medication and personal plans. An improvement plan identified relevant areas for development. Team and individual staff meetings with management supported communication and helped provide direction, support and training opportunities. This was contributing to improved outcomes for children. Processes and procedures must now be fully embedded into practice to ensure continuous and sustained improvement.

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

To support children's learning and development, the manager and staff should ensure children experience high quality play and learning relevant to their age and stage of development.

This should include, but is not limited to:

- a) Ensuring staff are knowledgeable in supporting children's learning.
- b) The environment is well-resourced and inviting for children.
- c) Meaningful play experiences are planned to meet the individual needs of children.

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 have fun as I develop my skills in understanding, thinking and investigation, and problem solving, including through imaginative play and storytelling" (HSCS 1.30).

This area for improvement was made on 22 January 2025.

Action taken since then

Since the previous inspection, a significant amount of work had been done to improve the quality of the environment. Some progress had been made in developing a balance of intentional and responsive planning. Most staff interactions were supportive and helped to promote a positive atmosphere. Some staff effectively extended and built on children's play and learning. However, a few staff did not always recognise or respond to children's cues for help. There were some missed opportunities when skilled and effective questioning was not used well to extend children's curiosity and problem solving skills. The use of training and role modelling was beginning to support staff interactions. Supporting staff skills development should continue to ensure children experience consistently positive play and learning.

This area for improvement has not been met.

Previous area for improvement 2

To enable all children to be cared for in an environment that meets their needs and supports them to reach their full potential, the provider, manager and staff should ensure children experience an environment that is welcoming, well-maintained, comfortable and homely.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience an environment that is well looked after with clean, tidy well maintained premises, furnishings and equipment" (HSCS 5.24).

This area for improvement was made on 22 January 2025.

Action taken since then

A range of good quality resources was available for children to play with. These included some real life and open ended natural materials to support children's curiosity and creativity. Overall, spaces used by children were well thought out and looked clean and inviting. Additional soft furnishings and equipment had been added to playrooms, which helped create a more homely and comfortable experience for children. The manager advised this was an ongoing area of development.

This area for improvement has been met.

Previous area for improvement 3

To ensure all children experience nurturing and supportive mealtimes, the provider should support the staff and management team to improve mealtime experiences.

This should include, but is not limited to:

- a) Ensuring there are sufficient staff to sit with children to support a safe, sociable experience.
- b) Ensuring that the organisation of mealtimes improves so that children's needs are prioritised.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible" (HSCS 1.35).

This area for improvement was made on 18 July 2024.

Action taken since then

Children enjoyed organised and unhurried snack and mealtimes. Staff sat with children as they ate, promoting conversation and providing effective supervision to keep them safe. Children were encouraged to be independent and were supported appropriately for their age and abilities. As a result, most children were nurtured during mealtime experiences.

This area for improvement has been met.

Previous area for improvement 4

To support children's wellbeing, development and progress, personal planning approaches should be further developed.

This should include but not be limited to:

- a) Ensuring meaningful support strategies are in place and used by staff to sensitively and effectively support children.
- b) Ensuring parents are meaningfully involved in reviewing children's personal plans.

This is to ensure 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 18 July 2024.

Action taken since then

Personal plans were in place for all children. Children were cared for by staff who knew them well and families were included in developing and reviewing plans to ensure information was current and relevant. Where children required some additional support, positive working relationships had been established with external agencies. This helped develop support plans to guide staff on the strategies needed to support children's development and wellbeing. Further consistency was needed to ensure strategies of support were consistently used, for example when children transition into new playrooms. Some plans did not yet hold enough information to fully support staff to provide individualised care. This raised the potential for inconsistent care and support.

This area for improvement has not been met

Previous area for improvement 5

To promote high quality play, learning and development opportunities, the provider should ensure staff are supported to develop an understanding of relevant child development theory and approaches that empower children to lead their play and learning.

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 have fun as I develop my skills in understanding, thinking, investigation and problem solving, including through imaginative play and storytelling" (HSCS 1.30) and "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 18 July 2024.

Action taken since then

Some training had been undertaken to support staff understanding of how children play and learn. Opportunities at staff meetings including scenario discussion and quizzes supported staff understanding and reflection. However, staff training was not yet consistently impacting on practice. Whilst staff were kind, interactions at times were inconsistent to support children's learning and development. We discussed with the manager how further training and support relating to child development and play behaviours would benefit staff and help build their confidence in providing stimulating play experiences.

This area for improvement has not been met.

Previous area for improvement 6

To ensure children are effectively safeguarded, the staff and management team should be supported to improve their knowledge of child protection.

This would include but not be limited to:

- a) Ensuring the staff and management team have a sound knowledge of the indicators of harm and how to report any concerns.
- b) Ensuring the staff and management team understand the importance of recording events consistently in children's chronologies.

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 18 July 2024.

Action taken since then

Children's safety was promoted through staff and management understanding of their role in identifying, recording and reporting any safeguarding concerns. Chronologies were in place, where required, to track key events in children's lives. Management and staff attended child protection training and a policy was in place to support staff in the processes should they identify a concern.

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?	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

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 ਵਿਚ 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.