

Leaps and Bounds Day Care Kirkliston

Day Care of Children

15a Main Street
Kirkliston
EH29 9AE

Telephone: 0131 333 2679

Type of inspection:
Unannounced

Completed on:
20 June 2025

Service provided by:
Leaps and Bounds Nursery Limited

Service provider number:
SP2005007922

Service no:
CS2015334559

About the service

Leaps and Bounds Day Care Kirkliston is registered to provide an early learning and childcare service to a maximum of 148 children at any one time aged between birth and primary seven.

The service may be provided from two locations as follows: From 15a Main Street, Kirkliston EH29 9AE, care may be provided for a maximum of 78 children at any one time aged between birth and primary school entry. From Kirkliston Community Church, 70 Main Street, Kirkliston EH29 9AB, care may be provided for a maximum of 70 children at any one time of primary school age. Within this number, a maximum of 10 children who have registered to start school after the August holidays may be cared for. In addition to the community rooms, the service will have the additional use of the two portacabins.

The service is currently operating the out of school care service from Kirkliston Community Church for the breakfast club from 07:30 until 09:00 hours and after school from 14:30 until 18:00 hours. Nursery provision is operated from 15a Main street, Kirkliston for children from birth to primary school entry from 07:30 until 18:00 hours.

Leaps and Bounds Nursery Limited is the provider. The nursery is in receipt of funded placements from the City of Edinburgh Council for eligible children aged from three to five years. The service is located in the Kirkliston area of Edinburgh. There are three main playrooms in the nursery building for children from birth to two years, for children aged two to three years and for children aged three to five years. Each playroom has direct access to an outdoor area. The breakfast and out of school care also have access to separate outdoor area. The service is next to local transport routes and near shops and schools.

About the inspection

This was an unannounced inspection which took place on Tuesday, 17 June 2025 from 09:00 until 18:00 hours and Wednesday, 18 June 2025 from 07:40 until 15:30 hours. 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
- reviewed feedback from 14 families and spoke directly to six parent / carers
- observed practice and daily life
- reviewed documents
- spoke with management.

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 nurturing, warm and kind interactions from staff.
- Children were engaged in their play and interested in what was available to them.
- Staff were positive about their role and had good relationships with children and their families.
- Improvements had been made since the last inspection that were having a positive outcome for children.

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, as several important strengths taken together outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children experienced warm and kind interactions from staff throughout their day. Staff acknowledged children as they moved around the service by saying hello and asking how they were feeling. Children experienced personal care that was sensitive and gentle, including asking permission before wiping faces and changing nappies. This let children know that they were valued and important.

Personal plans were completed and reviewed with parents and held relevant information about each child. Children attending the out of school care contributed to their own plans and completed 'all about me' paperwork. For example, detailing how to support their care and dietary needs. This provided an opportunity for older children to have ownership about how they received care. Strategies of support were identified and provided information on how to support children's development and wellbeing. This could be enhanced further with strategies being more specific, which would allow for a fuller evaluation of children's progress and plans for next steps. To further ensure that children were receiving the right support at the right time, the service should consider when strategies of support progress into a 'Getting it Right for Every Child' planning approach.

Effective systems were in place to manage medication and were reflective of current guidance. The service responded promptly to suggestions made to enhance the management of medication. As a result, children's medical and health needs were safely supported.

Children experienced mealtimes that were relaxed and unhurried with rolling lunches and snack across all rooms and out of school care. This enabled children to make decisions about when and who they shared mealtimes with. Most children had opportunities to develop independence through self-service, pouring their own drinks and clearing up afterwards. Meal options were healthy with a parent commenting that, "The children have access to a range of healthy food across the week." We informed the service that some children in the out of school care were asking for additional snack, further consideration should be given to offering some additional options or increasing the quantity of snack available as part of menu planning. A parent had commented that sometimes the food options at breakfast club and out of school care can be similar; we suggested reviewing this as part of ongoing quality assurance.

Children benefitted from sleep arrangements that were reflective of their needs. Babies had cots to sleep in when needed, and an external sleeping cabin provided a quiet space for groups of children to rest and sleep together. Staff monitored and supervised sleeping children, ensuring that they were safe and comfortable. Children had their own blankets and comforters, providing reassurance and familiarity when sleeping or resting. There were quiet spaces in the pre-school room for children to rest and relax. Similarly, in the out of school club there were comfortable sofas to rest and relax on and quiet areas were created with blankets and cushions for children to enjoy quieter activities after school.

Mandatory training including child protection had been completed and staff knew who to speak to if they were concerned about a child's wellbeing or safety. Information detailing child protection officers were displayed for staff to see and follow.

Quality indicator 1.3: Play and learning

Children had fun as they played with staff and friends. Staff consistently worked at children's level, making themselves accessible, supporting and extending their play and learning through some supportive questioning. Most children were engaged in their play for long periods of time as a result of staff availability and interactions.

Environmental print, interactive displays and interactions supported children's literacy and numeracy development. Children were engaged in conversations, songs were used as part of daily interactions and to signify transitions in their day. Children shared stories indoors and outdoors with staff. Books were included as part of displays, enabling children to relate stories and themes to their play. We suggested using photograph books to further support children through daily routines, including mealtimes, or to reflect on experiences such as caring for the caterpillars. This would enable children to revisit and consolidate learning experiences. Some strategies of support for children included the use of singalong to support communication. We suggested adopting this as an approach across the service to support all children's communication.

Effective approaches to planning were in place that reflected opportunities for intentional and child-led play and learning. Floorbooks were used to document experiences and capture children's voices. These were accessible to children, enabling them to reflect on and revisit their experiences. Children's experiences could be enhanced further through strengthening evaluations of learning opportunities. For example, tracking children's actual and intended learning will help to develop next steps. Planning for schematic play would further enhance younger children's experiences.

Learning journals were used to share children's learning and experiences with parents at home, and several parents shared their child's activities outwith the service. This enabled relationships to be strengthened further as conversations were shared between the service and home. This meant that children could observe the supportive and interested conversations taking place between adults that were important to them.

Children involved in the out of school care children's committee led and developed their aims and objectives. A child was heard speaking to a group of committee members that they needed to arrange a time to meet to discuss committee business. This demonstrated the ownership and responsibility shared in the group. The committee gave regular awards to others in the club to recognise their efforts and achievements. This could be enhanced further through the committee contributing the service development and fundraising events. Children had expressed an interest in helping at the nursery, and this had been responded to with a small group spending some time with the younger children. This meant that children's interests and views were supported and actioned, letting them know that they were important.

Children had opportunities to be involved in the local community through participating in the annual gala day. Some children told us how they were involved by dressing up and walking in the street with their friends. Floorbooks displayed photographs of children on trips within the local community and to green spaces. This helped to build children's sense of belonging and identity.

How good is our setting?

4 - Good

We evaluated this key question as good, as several important strengths taken together outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

The environment was clean and well-ventilated with natural light and direct access to outdoors. In the out of school care, children were also able to access outdoors directly from the hall. As a result, children were able to move freely from indoors and outdoors.

The outdoor spaces were safe with secure gates that were locked and a secure entry system. Risk assessments were held and supported staff in carrying out regular checks of the environment and resources to ensure children's safety and wellbeing. We suggested including in the garden risk assessment how the temperature of the artificial grass is monitored on warmer days to ensure that it is not too hot for children to sit and play on.

Children were able to freely access the garden outdoors and had the choice to play with static resources, including a climbing frame and house area that provided shelter and role play. Artificial grass covered most of the garden area and, as a result, limited the opportunities for nature to be present in children's play and learning. We suggested developing the garden areas further to include some aspects of nature, including plants, flowers and vegetables for children to observe and note seasonal changes as they care for them.

Children benefitted from resources that were in a good condition and play spaces that were set up for children and reset throughout the session as required. We suggested that the out of school care would benefit from some additional resources to provide more choice to children's play.

Infection prevention and control practice and the use of personal protective equipment along with food safety practices supported children's health and wellbeing. Children were supported and reminded to wash their hands and staff ensured they washed their hands after wiping noses, and before and after mealtimes.

Displays were attractively presented and positioned for intended viewing by parents and children. Display boards positioned at lower heights ensured that children could view them easily and higher positioned displays enabled parents and visitor to view children's work.

How good is our leadership?

4 - Good

We evaluated this key question as good, as several important strengths taken together outweighed areas for improvement.

Quality indicator 3.1: Quality assurance and improvement are led well

Visions, values and aims were displayed and had recently been reviewed by the whole staff team. This meant that parents and visitors were able to view them and know the ethos of the service. We suggested

involving parents, children and the out of school care children's committee when reviewing the vision, values and aims of the service as part of consultation processes.

Improvements had been made since the last inspection to quality assurance processes. Effective systems were in place to support improvement, including daily, weekly and monthly quality assurance tasks being undertaken. Management had reflected that this was having a positive impact on interactions with the team. For example, daily checks of the environment initially required management to prompt adjustments. As staff were now more aware of expectations, there has been less need for prompting. As a result, children experienced areas that were set up for them with resources that supported their interests. This approach was impacting positively and should continue for it to be embedded in practice.

Supervision and annual appraisals were in place and provided an opportunity to support practice. A learning experience folder had been introduced to record staff achievements through observations and peer feedback. This enabled achievements to be recognised and management to signpost to any further development actions. Staff spoke positively about undertaking additional training to enhance their practice. We discussed with management the benefits of staff being able to network with similar services within their local area to share practice and to have the opportunity to attend external training. Internal training was planned for and designed to be interactive, enabling staff to participate in discussions and activities. Staff commented about their training, "It has allowed me to use what I learn in my practice and develop my skills as a practitioner."

Regular team meetings were planned for to ensure that all staff were able to attend. These provided an opportunity to share information and discuss service developments. We signposted to training that would support improvements detailed in key question 1. This included the Care Inspectorate hub and approaches to slow pedagogy. We suggested for staff to be actively involved in self-evaluation so that they can become more familiar with quality assurance documents and the use of these to benchmark their findings.

Newsletters and questionnaire were used to share and gather information from parents. The out of school care children's committee had developed and shared questionnaires and responses were collected. We discussed how this could be shared with parents and children using a 'what you said, what we did display board'. This would enable parents and children to know that their opinions mattered and influenced the service. We suggested moving forward to consider how to gather children's and parents' views across the year and how to include this as part of service development.

We recognised the positive and responsive approach that management had taken since the last inspection, and the engagement in the communications with us regarding their action plan to address the areas for improvement made at the last inspection.

How good is our staff team?

4 - Good

We evaluated this key question as good, as several important strengths taken together, outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

Staff were warm, nurturing and caring. They worked well together to create a welcoming environment for children and families. This helped to create a positive atmosphere for both staff, children and families.

Staff engaged well with children and most had conversations that sparked children's curiosity. These skilled approaches provided positive role modelling to others in the team.

The service was appropriately staffed, and staff were suitably deployed throughout the session to meet children's needs. They communicated regularly about children's individual needs and when a task took them away from their area, another member of staff stepped in to fill the gap.

Staff absences were managed across the Leaps and Bounds services. For example, staff from Drumbrae nursery provided cover at Kirkliston. This meant that children were familiar with the staff and staff knew children and the service well enough to care for them.

Staff fed back to us that they felt their strengths and skills were communication and positive relationships. Staff spoke positively about their role and the setting. They felt supported by management and could ask for help or guidance. Management knew staff well and were respectful and friendly in their interactions. The staff achievement wall displayed comments from colleagues about their practice and successes. This fostered a positive ethos and environment for staff, and children benefitted from experiencing the same approach towards them.

Induction processes were in place for new staff and mentors provided additional guidance and support. Staff told us that all staff are helpful to any new member of the team. Newer staff could talk us through their experience of induction. They confidently explained the stage of their induction, and mandatory training and reading that they have completed. As a result, children were being cared for by staff who had the correct knowledge, skills and guidance that was right for them. We suggested developing an exit interview to complete with staff before they leave their employment. This would be part of further quality assurance and could provide information to influence approach moving forward.

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, learning and development, the provider should develop children's personal plans. This should include, but is not limited to, ensuring children's needs are clearly identified, support strategies are explicit, and reviews are meaningful. Older children should be empowered to help shape and review their personal plans to reflect their individual needs, preferences and wishes.

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 30 May 2024.

Action taken since then

Personal plans were in place for all children, with information provided from home. Strategies of support were recorded and staff could speak to these. Personal plans were reviewed with parents. Strategies of support were reviewed and next steps identified where appropriate. Older children contributed to their personal plans in an 'all about me' section.

This is met.

Previous area for improvement 2

To support children's wellbeing, learning and development, the provider should promote child-centred planning and skilful interactions. This should include, but is not limited to ensuring children's observations and planning reflect children's significant learning, involving children in planning and evaluating their learning and extending interests so children feel heard and empowered.

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).

This area for improvement was made on 30 May 2024.

Action taken since then

Planning approaches were in place and reflected children's interests. Observations were recorded in learning journals and detailed children's interests and developments. Floor books were available to children to look at and reflect on previous experiences. Children's voices were captured in floor books through quotes and some children had made marks on them.

This is met.

Previous area for improvement 3

To support children's wellbeing, learning and development, the provider should ensure that all play spaces are attractively presented to inspire and add depth to children's 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).

This area for improvement was made on 30 May 2024.

Action taken since then

Play spaces were set up for children's arrival and reset throughout the day. Areas were clearly defined and resourced well. Displays were interactive enabling children to play with them and were reflective of themes within planning.

This is met.

Previous area for improvement 4

To support children's wellbeing, learning and development, the provider should ensure quality assurance systems are benchmarked against best practice and focus on the impact on outcomes for children.

This should include but is not limited to, formalising staff support and supervision and staff practice observations to help promote a culture of critical reflection, continuous improvements and accountability.

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' (4.11).

This area for improvement was made on 30 May 2024.

Action taken since then

Approaches to quality were in place. A calendar plan was used to spread quality assurance and self-evaluation tasks across the year. Staff received supervision and appraisals. A staff development folder was in place to gather evidence of practice and achievements, this was used to inform staff development plans and to signpost to additional training.

This is met.

Previous area for improvement 5

To support children's wellbeing, learning and development, the provider should review the staff mix of skill set and experience to help ensure positive outcomes are consistently secured for all children.

This should include but not limited to:

- Ensuring leaders have the skills and qualities to model and promote best practice.
- Making sure there is a strong management presence and oversight across the whole service to ensure consistency in quality of care, 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 have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 30 May 2024.

Action taken since then

Members of the management team were present in playrooms and in the out of school care. Along with some members of staff, they provided role modelling through practice and interactions. Management was aware of staff skills and deployed staff in response to this. The skills and strengths within each team complement each other. There had been a turnover of staff in the out of school care and new staff had been recruited and were being supported by existing staff and management.

This is 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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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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