

Corstorphine Childcare Day Care of Children

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Type of inspection:
Unannounced

Completed on:
30 June 2025

Service provided by:
Corstorphine Childcare Ltd

Service provider number:
SP2023000243

Service no:
CS2023000369

About the service

Corstorphine Childcare provides a care service to a maximum of 30 children who attend primary school at any one time. The service operates after school, during term-time, Monday to Thursday.

The service is located in the Cougars Rugby Club, Corstorphine. There are two playrooms, kitchen access and toilets. The service has exclusive use of the club during operating hours.

The community outdoor space is accessed directly from the club.

About the inspection

This was an unannounced inspection which took place on 24 June 2025 from 14:45 to 17:30 and 25 June 2025 from 14:00 to 17:30. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included registration information and information submitted by the service. This was the first inspection since the service had been registered.

In making our evaluations of the service we:

- spoke with children in the service and four parents onsite
- received written feedback from 13 families in response to an online survey
- spoke with staff and management
- observed practice and daily life
- 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 were confident, happy and having fun.
- Personal plans could be strengthened further to reflect children's ongoing individual needs.
- Children were able to lead their own play and learning.
- Children benefitted from direct access to outdoor.
- Quality assurance processes and monitoring aspects of service delivery should continue to be embedded.

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

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

Children were happy, engaged and having fun in the setting. The atmosphere was calm and respectful, and we saw that children had built positive relationships with each other and staff. Mostly all parents who responded to our online survey told us they were happy with the care and support their children received. Comments included, "We think it is brilliant", "We feel our kid is in good, safe and nurturing hands while in the club" and "It's honestly a breath of fresh air".

Staff were welcoming and responsive to children when they collected them from school. Good relationships had been built with school staff which supported a smooth transition for children. The walk back to the setting was well planned and staff chatted with children about their day's events. Children clearly knew the routine and in keeping themselves safe and were respectful and listened to staff.

Staff supported children's health, care, and wellbeing needs through personal plans. These had been developed with children and their families and contained clear information about their current needs, preferences, and interests. This included where children had allergies or other medical needs. We discussed ways to make the information more accessible for children. This would help encourage them to regularly review, evaluate, and set goals in a meaningful way.

Children's medical needs were supported by the safe storage of medication and information about the action to be taken by staff was documented. Staff had a good understanding of children's health needs. We discussed where some changes could be made to medication forms. For example, ensuring that signs and symptoms of allergies were clearly recorded on medication forms.

Children's safety and wellbeing was supported by staff, who understood their role in identifying, recording, and reporting any safeguarding concerns. All staff had completed relevant child protection training. This meant children and their families were provided with the appropriate help and support.

Children experienced snack times that were sociable, relaxed, and unhurried. They enjoyed sitting with friends to eat and discuss their day. Children were consulted about what types of snacks they would like, and their choices were included in the weekly snack menu. Snack was served to children, and this took some time for all children to be served. We discussed giving children more opportunities for serving. This would help give children a sense of responsibility and ownership of routine. At times children left the table while still eating. Staff should remind children to sit at the table while eating to ensure their safety.

Quality Indicator 1.3: Play and learning

Children had fun throughout the session and benefitted from a range of play experiences that provided a balance of spontaneous and planned opportunities. They were actively leading their own play and learning and engaged with resources for sustained periods which supported their interests. These included Lego, loom bands and art and crafts activities. Children told us they enjoyed the club, and one child told us, "There's lots to do, and nothing else is needed".

Resources and experiences promoted children's creativity and curiosity. To provide more choices for this type of play, the service should continue to develop more natural and open-ended play materials. This would extend learning and enhance creativity and imagination.

Children were supported by staff who used opportunities to follow children's interests in literacy and numeracy. For example, individual and group reading and conversations and discussions with staff. Further opportunities included mark making materials and tabletop games.

Staff based planning on children's interests. We discussed further ways to capture children's experiences and voices to inform and support further planning. For example, through the use of floorbooks. These would document children's play and learning and encourage them to share their reflections.

Children had daily opportunities to be active which included access to the outdoor community space. The outdoor experiences created opportunities for children to run, play, and explore. This supported children's health and wellbeing. Staff joined in with games and supported children's play. This included football, outdoor games, and imaginative play.

How good is our setting?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 2.2: Children experience high quality facilities

The service operated from two playrooms within Cougars Rugby Club. Children benefitted from a warm and welcoming environment with plenty of natural light and ventilation to support their wellbeing. Play spaces reflected children's interests and provided a range of opportunities for active play and learning.

The setting and equipment were safe, secure, and well-maintained. There was a security door to ensure that members of the public could not access the building independently. Risk assessments were in place for indoor and outdoor areas and staff carried out daily checks of all spaces. This ensured any potential risks were identified and actions taken to remove these. This meant spaces were safe for children to play and explore.

Good communication between staff meant that children were always accounted for. For example, through the use of walkie talkies between the indoor and outdoor spaces. They had effective systems in place for signing children in and out of the setting and ensured that children were collected by an appropriate adult.

Children were supported to be healthy and safe through effective infection prevention and control routines. Staff had implemented appropriate measures to keep children safe and healthy. For example, children were encouraged to wash their hands, and tables were cleaned after children had finished their snack. The playroom was visibly clean, and staff reported maintenance issues quickly to ensure the premises were well-maintained.

Resources were easily accessible to children and the layout of the playroom provided a variety of areas to enjoy different types of play with space for floor play and use of tables. This resulted in children having the opportunity to make choices about how they spend their time. Children had the opportunity to relax and enjoy books. The manager told us of plans to add further cosy areas for children to relax and self-regulate.

Children's health and wellbeing was supported through regular exercise and fresh air. The outside community space was monitored by staff and children were familiar with boundaries and where they could play. One parent told us, "The green space outside is wonderful and my (child) uses it frequently".

Information about children was kept securely. Sensitive information was only shared with those who needed it to meet children's needs. As a result, children's information was protected, and storage complied with relevant best practice.

How good is our leadership?

3 - Adequate

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

Quality indicator 3.1: Quality assurance and improvement are led well

The manager and staff team had a good working relationship and had a positive outlook on change and improvement. Staff told us they felt supported and valued by the manager. This created a culture of respect within the team.

Parents were kept informed about the service during pick up times and online weekly updates. Most families told us communication was good and that they always received information, however, some parents felt this could be improved. We discussed communication methods with staff to ensure parents were kept abreast of changes within the service, for example, ensuring families are kept informed of changes in the staff team.

Children and their families' views and ideas were valued by the service and used to inform improvements. For example, a parent asked about children's safety when parents were collecting children and leaving the premises. Staff were able to reassure parents that staff were allocated to 'door duty' and responsible for monitoring the door when children and families were leaving. This was communicated to all parents to highlight safety procedures and that parents' opinions mattered.

The approach to quality assurance varied and at times the processes in place were not yet fully effective and robust. Further work was needed to strengthen quality assurance processes to support children's overall wellbeing and ensure a consistently high-quality service. This should include priorities for improvement and how these improvements will be achieved. The service should consider their improvement priorities based upon the feedback from families, children and staff, and from their own self-evaluation processes. They should use this to inform and create an improvement plan for the service (**see area of improvement 1**).

Daily briefings gave staff a good overview of the day's events and time to share and discuss updates of children's ever-changing needs. Team meetings took place regularly and these provided opportunities for staff to discuss a range of topics, including sharing information about children and areas for development within the service.

Areas for improvement

1. To improve upon outcomes for children, quality assurance and self-evaluation procedures should be developed further to assess and improve the quality of the provision in line with best practice.

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).

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and clearly outweighed areas for improvement.

Quality indicator 4.3: Staff deployment

Staff worked well together to create a warm and welcoming environment. They had established strong working relationships and had created a positive ethos, which promoted a supportive environment for children and their families. They were respectful in their interactions and caring in their approach. Parents were positive in their responses of staff and comments included, "The staff are very friendly, helpful, professional and supportive".

Staff communicated well with each other which ensured that children's safety was maintained. They were flexible in their approach to follow children's interests and requests in play. Clear roles and responsibilities were assigned to staff, for example, one staff member oversaw the entrance area, so children felt welcomed on their arrival and they were recorded on the register for safety. Other staff were engaged with the children at play. Staff were spread across the different spaces, which meant that children had a choice of where they wanted to spend their time.

Staff had a good mix of skills, knowledge and experience to meet children's needs. We would encourage the team to continue to develop their knowledge, skills, and practice by using best practice guidance and frameworks to support positive outcomes for children. Staff attended training sessions and various online courses throughout the year. They were now beginning to identify the impact of training and how this positively influenced their practice. As a result, this supported continuous development which promoted positive outcomes for children.

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
1.2 Children are safe and protected	4 - Good
How good is our setting?	4 - Good
2.2 Children experience high quality facilities	4 - Good
How good is our leadership?	3 - Adequate
3.1 Quality assurance and improvement are led well	3 - Adequate
How good is our staff team?	4 - Good
4.3 Staff deployment	4 - Good

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