

Happy Days Day Care of Children

14-18 Ledgate Eastside Kirkintilloch Glasgow G66 1PZ

Telephone: 01417 765 009

Type of inspection:

Unannounced

Completed on:

17 July 2025

Service provided by:

Happy Days Nursery (Scotland) Ltd

Service provider number:

SP2003000771

Service no:

CS2003003829



About the service

Happy Days is registered to provide care to a maximum of 69 children in the following age groups:

- 15 children aged six weeks to two years,
- 22 children aged two to three years,
- 32 children aged three to five years.

The provider is Happy Days and this is one of three services operated by the provider.

The service is located in Kirkintilloch. Accommodation for children comprises of three playrooms for children under two, two to three and three to five. There is a large garden area which has been divided to create an area suitable for babies and play areas for children over two.

About the inspection

This was an unannounced inspection which took place on Thursday 9 May and Friday 10 May 2024. 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 attending the service
- gathered feedback from family members of children using the service via online questionnaires
- 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; and
- 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 happy, confident, and having fun.
- · Mealtimes were calm, sociable, and unhurried.
- Children's opportunities for play and learning were enhanced through meaningful connections with their local and wider community.
- The layout of spaces had been considered to promote independence and engagement.
- Staff were warm, motivated and enthusiastic in their role, which helped to create a positive and welcoming environment for children.
- To support children's wellbeing and self-regulation, the provider should ensure all children are supported by staff using positive, developmentally appropriate strategies.
- The provider should implement a robust system for ongoing maintenance and repairs.

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 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, confident, and having fun. They experienced warm, nurturing, and responsive care from staff which helped them to feel welcomed. We observed praise, cuddles and reassurance from staff which meant attachments and relationships were strong resulting in children feeling safe, and secure in the service. Parents told us:

'Staff are great. They seem highly motivated and are very caring,' and

'Staff are always very welcoming and friendly. They are approachable and take time to answer any questions I may have'.

Staff knew children well and were able to talk confidently about individual children's health and emotional wellbeing needs. Personal plans were in place and included some relevant information to help staff meet these needs. While individual targets had been identified, it was not always clear what specific strategies were in place to support children's emotional regulation and overall wellbeing. We discussed with the management team the importance of monitoring personal plans to ensure consistency in planning how children's needs will be met. This will help ensure children continue to receive care and support that reflects their current needs. An area for improvement was made following a recent complaint and this will be continued. (See area for improvement 1.)

Staff had improved mealtimes since the last inspection, creating a more positive and nurturing experience. Mealtimes were calm, sociable, and unhurried. Children were encouraged to be independent and enjoyed meaningful interactions with staff and friends. Staff used this time to check in with children. Babies were supported with warmth and care. For those staying for dinner, meals were provided in line with individual routines and parental wishes. One parent told us, 'The lunch menu is good and there's always an option my child likes and they have changed the snack menu recently, it was already quite healthy but now I feel it's even better with things like smoothies, more veg etc.' As a result, children were developing healthy eating habits in a supportive environment.

Children's health and wellbeing were supported through clear medication procedures. Medication was stored safely and in line with best practice guidance 'Management of Medication in Daycare of Children and Childminding Services'. We sampled consent forms and health care plans and found these followed current guidance. This was an area for improvement at the last inspection and has now been met.

Children were supported to sleep at times that reflected their individual needs and parents' wishes. They were provided with individual sleep mats or cots, sheets, and comforters in an environment that helped them rest and relax. This supported their emotional security and overall wellbeing.

Quality indicator 1.3: Play and learning

Children were visibly happy and content as they actively engaged in the range of activities on offer. They accessed a variety of play-based learning experiences, such as climbing and loose parts play outdoors, imaginative play in the home corner, and building with large wooden blocks. We observed a balance of adult-led and freely chosen activities that helped children develop key skills in problem solving, mark making, and exploring risk through play.

Since the last inspection, the team in the 3–5 room had begun implementing a new planning cycle. Floor books were used to evidence children's learning experiences and progress. These included examples of children's voice and links to relevant areas of the curriculum. Staff were beginning to use observations to identify gaps in learning, such as rhyme production, and recognised where progress had been made, for example, in early writing skills. The team shared their intention to focus on individual observations next term. We encouraged them to continue developing this approach to support more effective monitoring of children's progress. This was an area for improvement at the last inspection, and this has now been met.

Throughout the inspection, we observed some opportunities that supported children's development in language, literacy, and numeracy. Staff regularly read stories with the children and used some questioning to extend their thinking and understanding. A selection of numeracy resources was available to help children develop number recognition. This showed us that children were learning some early literacy and numeracy skills.

Children's opportunities for play and learning were enhanced through meaningful connections with their local and wider community. Outings to the library, nature walks, and regular use of the minibus for football sessions helped children build a sense of belonging and identity. These experiences supported children to develop confidence in new environments and build relationships beyond the nursery. Staff recognised the value of community connections and used them well to enrich children's experiences across a variety of contexts. This meant children were engaged in real-life, purposeful learning beyond the nursery setting.

Areas for improvement

1. To support children's wellbeing and self-regulation, the provider should ensure all children are supported by staff using positive, developmentally appropriate strategies. This should include, but is not limited to, when a specific need is identified, records accurately reflect how children will be supported. Children's care plans are regularly reviewed, and parents are involved in the development and implementation of support strategies to promote consistency. Policies and procedures should also be reviewed.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

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 environment was warm, welcoming and well-ventilated for children. Since the last inspection, the team had worked hard to improve both the indoor and outdoor spaces. The addition of soft furnishings such as couches, comfy chairs, and wooden arches created cosy areas where children could rest, relax, or spend time on their own if they wished. This created a nurturing atmosphere that promoted children's emotional security and choice.

The layout of spaces had been considered to promote independence and engagement. A variety of resources, including open-ended materials and loose parts, were accessible throughout the nursery. One parent told us, 'My child has been involved in a great range of experiences and opportunities within the nursery. From local walks in the community, outdoor play, and different learning experiences throughout the day such as painting, baking, construction play etc.' This enabled children to explore and follow their own interests through meaningful play experiences.

Children confidently led their own play by independently accessing a range of activities, including block play, mark-making, arts and crafts, role play, and messy play such as shaving foam and water. Loose parts were used across the setting, with recent developments evident in all playrooms. This supported creativity, problem-solving, and sustained engagement in play.

Children had free-flow access to outdoor spaces across the day. Outdoors, children enjoyed a wide range of experiences including climbing, makes cakes in the mud kitchen, exploring water, and taking part in an assault course. One parent told us that their child goes for walks in the local community, the nature trail and plays in the garden. This supported children's physical development, wellbeing, and enjoyment of nature.

Since the last inspection, two new nappy changing facilities have been installed, in line with current guidance. Improvements to the overall environment, including repairs and upgrades to floorings and skirting boards, have also contributed to a cleaner, safer, and more welcoming space for children, therefore, the requirement has been met.

However, while progress has been made, we identified ongoing maintenance issues that must be addressed to ensure children continue to experience a high quality, safe hygienic environment. The previous area for improvement related to infection prevention and control will now be updated to include the need for a consistent approach to ongoing maintenance as part of the provider's quality assurance systems. (See area for improvement 1.)

Areas for improvement

1. To ensure children continue to experience a clean, safe, and well-maintained environment, the provider should implement a robust system for ongoing maintenance and repairs. This should include regular checks of the premises and prompt action to address any issues identified. Embedding this within quality assurance processes will help support effective infection prevention and control and promote a high standard of care across the setting.

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 and well- maintained premises, furnishings and equipment' (HSCS 5.22).

How good is our leadership?

4 - Good

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

Quality indicator 3.1: Quality assurance and improvements are led well

Throughout the inspection, the manager and staff team demonstrated a reflective and honest approach when discussing progress since the previous inspection. The team spoke openly about both the improvements made and the challenges faced. We were encouraged by their continued commitment to improvement, supported by effective engagement with the local authority. This collaborative approach was helping to strengthen outcomes for children, families, and staff.

The team were aware they remain on a journey of improvement and welcomed feedback. Their ability to reflect and adapt demonstrated a growing capacity for positive change. We are confident the service has the potential to continue developing practice and securing sustained improvements.

Leaders used regular team and leadership meetings to identify what was working well and agree clear priorities for improvement. An improvement plan was in place, with realistic targets that focused on enhancing children's learning and wellbeing. Staff shared how they were involved in short-term planning cycles, such as six-week sprints, to evaluate and test out improvements. This provided clarity and direction for staff, and ensured improvements were meaningful and achievable.

Children and families' views were sought to inform improvements. For example, a noticeboard at the entrance highlighted developments made over the past year. While this helped keep families informed, evidence of parental involvement had reduced since our previous visit. One parent told us, 'I am not asked regularly about giving feedback.' We discussed reintroducing opportunities for family engagement as part of the service's ongoing quality assurance calendar.

A culture of reflection and self-evaluation was becoming more established. The management team had developed a quality assurance calendar, and we could see the early impact of this work. For instance, there had been improvements in floor book planning and learning documentation. This supported more consistent practice and strengthened children's experiences.

The manager had introduced new 'area guidance' to support consistency across playrooms. This outlined expectations for experiences, displays, and documentation of learning and how these would be monitored. We encouraged the manager to continue embedding this approach to support staff development and further improve quality across the setting.

Children remained central to the improvement work within the service. Staff were increasingly using evidence and reflection to help drive forward change, with a clear focus on improving outcomes. This was contributing to more purposeful and child-centred practice.

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All staff were registered with the Scottish Social Services Council (SSSC), except for one individual. This was addressed promptly during the inspection, with the manager supporting the individual to complete their application without delay. This ensured safe recruitment practices and supported the safeguarding of children, families, and staff. The manager should now ensure that robust checks on staff registration are consistently carried out as part of the service's quality assurance processes. This will help maintain compliance and support children's safety and wellbeing.

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 were warm, motivated and enthusiastic in their role, which helped to create a positive and welcoming environment for children. The manager had considered the skills, experience, and personalities of the team when deploying staff across the setting. This supported staff to develop their confidence and helped ensure children's needs were met throughout the day.

We observed staff communicating well with each other and working together effectively to support children. Children's routines, including mealtimes, rest, and personal care, were flexible and responsive to their individual needs. These were not led by staff duties or break times, helping to ensure children's experiences remained consistent and unhurried. When transitions between routines did occur, these were managed sensitively and with care.

We recognised that there had been recent changes within the staff team, including several maternity leaves. On the first day of inspection, some staff appeared less confident in their roles. However, by the second day, we observed improved confidence and teamwork as staff became more familiar with the routines and received support from experienced colleagues. Staff should continue to work collaboratively to ensure children are consistently supported throughout the session, contributing to a calm and nurturing environment.

We found the service was now using the national induction resource to support new staff through a robust and reflective induction process. Staff were being mentored effectively by colleagues and leaders through modelling, observation and professional dialogue, which was supporting their learning and development.

Staff had been safely recruited in line with the guidance 'Safer Recruitment Through Better Recruitment'. All appropriate checks were carried out prior to staff starting in the service, supporting the safety and wellbeing of children.

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

Requirements

Requirement 1

By 31 August 2024, the provider must ensure that children are cared for in a clean, safe and well maintained environment. Maintenance of the building and repairs must be carried out to ensure that children experience a quality environment. The provider must, at a minimum, ensure there are plans in place to install a baby changing area within the baby room.

This is to comply with Regulation 10 (2)(a)(d) (fitness of premises) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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 and well-maintained premises, furnishings and equipment' (HSCS 5.24).

This requirement was made on 17 May 2024.

Action taken on previous requirement

The provider has installed two separate baby changing areas, in line with good practice guidance.

Repairs and upgrades around the nursery included:

- new cupboard doors
- Installation of new skirting boards
- · Replacement of kickboards around sinks

These improvements helped to support a clean and safe environment for children.

We have now asked the provider to ensure ongoing maintenance of the building. This should prioritise any work required to support effective infection prevention and control measures. (See area for improvement 1 in section 2.2 Children expereince high quality facilities.)

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 meet children's health, welfare and safety needs, the manager should develop children's personal plans.

This should include, but not be limited to, identifying and implementing appropriate strategies to meet children's needs, supporting progress and helping them to achieve their full potential.

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 1.1).

This area for improvement was made on 9 May 2024.

Action taken since then

Personal plans are now in place for every child. This was supporting staff to meet children's needs.

This area for improvement has been met.

See section 1.1 Nurturing care and support for further details.

Previous area for improvement 2

To keep children safe and healthy, management should ensure medication is audited, stored and administered appropriately. The service's medication policy and processes should be updated in line with the current health quidance 'Management of Medication in Day Care and Childminding Services'.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 9 May 2024.

Action taken since then

Children's health and wellbeing were supported through clear medication procedures. Medication was stored safely and in line with best practice guidance 'Management of Medication in Daycare of Children and Childminding Services'

This area for improvement has been met.

Previous area for improvement 3

To support children to achieve their full potential the manager and staff should ensure appropriate levels of challenge in learning through responsive planning. This should include, but not be limited to, high quality observations, meaningful next steps and evidence of progression in learning.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 9 May 2024.

Action taken since then

The team had begun implementing a new planning cycle. We encouraged them to continue developing their approach to support more effective monitoring of children's progress.

This area for improvement has been met.

For further details see section 1.3 Play and learning.

Previous area for improvement 4

To ensure children experience high quality facilities, management should review and improve the learning environment. This should include, but not be limited to, providing cosy spaces to rest and relax and ensuring high quality resources are available to support natural curiosity, creativity and imagination.

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 can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable to my age and stage, which stimulate my natural curiosity, learning and creativity.' (HSCS 2.27); and

'As a child, I play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

This area for improvement was made on 9 May 2024.

Action taken since then

Since the last inspection, the team had worked hard to improve both the indoor and outdoor spaces. The addition of soft furnishings such as couches, comfy chairs, and wooden arches created cosy areas where children could rest, relax, or spend time on their own if they wished.

This are for improvement has been met.

For further details see section 2.2 Children experience high quality facilities.

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Previous area for improvement 5

To ensure the quality of children's experiences are improved, the provider should implement robust quality assurance processes, including self-evaluation, covering key areas of practice. This should include, but not be limited to, monitoring children's personal plans, children's play and learning experiences, monitoring of staff practice, and evaluating and improving the nursery as a whole.

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 9 May 2024.

Action taken since then

A culture of reflection and self-evaluation was becoming more established, which will support the ongoing improvement of the service.

This area for improvement has been met.

For further details see section 3.1 Quality assurance and improvements are led well.

Previous area for improvement 6

To ensure children are cared for in a clean, safe and hygienic environment, the provider must ensure that staff implement robust infection prevention and control practices. This should include, but not be limited to, ensuring staff have received appropriate training and that quality assurance systems for the management of infection, prevention and control practices are effective and rigorous.

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 and well- maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 9 May 2024.

Action taken since then

All staff had received training on infection prevention and control measures. We observed staff washing their hands and carrying out routine cleaning tasks throughout the day.

However, ongoing maintenance issues were preventing staff from being able to thoroughly clean and maintain a hygienic environment.

As a result, this area for improvement will now be updated to include the need to address ongoing maintenance concerns.

See area for improvement under 2.2 – Children experience high quality facilities.

Previous area for improvement 7

To support children's wellbeing and self regulation, the provider should ensure all children are supported by staff using positive, developmentally appropriate strategies. This should include, but is not limited to, when a specific need is identified, records accurately reflect how children will be supported. Children's care plans are regularly reviewed and parents are involved in the development and implementation of support strategies to promote consistency. Policies and procedures should also be reviewed.

This is in order to comply with:

Health and Social Care Standards 1.19: My care and support meets my needs and is right for me'.

This area for improvement was made on 27 March 2025.

Action taken since then

While individual targets had been identified, it was not always clear what specific strategies were in place to support children's emotional regulation and overall wellbeing.

This area for improvemnt will be continued.

For further information see 1.1 Nurturing care and support.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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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