Dennistoun After School Service
Day Care of Children

Reidvale Neighbourhood Centre
13 Whitevale Street
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Glasgow
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Telephone: 01415 564 497

Type of inspection:
Unannounced

Completed on:
29 May 2025

Service provided by:
The Committee Dennistoun After School Service

Service provider number:
SP2003001185

Service no:
CS2003005676

About the service

Dennistoun After School Service provides an after school care service in the Dennistoun area of Glasgow. The service is registered to provide a care service to a maximum of 40 children aged 5 to 12 years. The service operates after school during term time and during school holidays.

The service is provided by The Committee Dennistoun After School Service and is based within the Reidvale Neighbourhood Centre. Children's accommodation is located on the upper level of the building. There is no available outdoor space, children make good use of the large gym hall and local parks.

About the inspection

This was an unannounced inspection which took place on 28 and 29 May 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with people using the service
- 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 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

- Staff were warm, kind and caring in their interactions with children.
- Staff had positive relationships with children and families.
- Children were happy, confident and relaxed in the service.
- Children were able to lead their own play and learning.
- The manager should further develop procedures for monitoring and auditing to support continuous improvement.

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, clearly outweighed areas for improvement.

Quality indicator 1.1: Nurturing care and support

We evaluated this quality indicator as very good, where significant strengths supported positive outcomes for children.

Children were cared for by staff that had developed friendly, trusting and fun relationships with them. Staff reacted warmly when collecting children from school and ensured they were safe as they walked together to the setting. A nurturing and supportive environment supported children to be relaxed, confident and engaged. Staff knew children very well and were attentive to their individual needs. Staff spent time chatting with children and actively listened to what they had to say. This supported strong attachments between children and staff and helped children feel safe and secure.

Children spoke positively about the adults caring for them. Some comments included:

" The adults are so sweet. If you are upset they will give you cuddles and tell you jokes to make you laugh, so you feel better. I love them all".

"They make sure we are happy after school and you always get a hug"

and, "They make us feel more confident by saying, you got this or you can do it".

Children had their own cloakroom space with pegs to keep their personal belongings and individual drawers in the playroom were used to store items important to them. One child told us "You have your own tray, so if you really want to keep something you can put it in there and it is safe". This contributed positively to children's sense of belonging within the service.

Children enjoyed a well organised, unhurried and sociable snack time. A healthy selection of snacks were provided on arrival and were set up to support children's independence skills through self-serving and pouring drinks. Children were offered an alternative if required and some had brought their own snacks. This meant children's individual dietary needs and preferences were catered for. Staff sat alongside children and together they engaged in relaxed, social conversations. This made it an enjoyable and social experience for children.

Each child had a personal plan that was created in partnership with parents and carers. Significant changes in children's lives were being recorded throughout the plan to reflect their current needs. Plans contained key information such as, language spoken, medical needs and wellbeing assessments. This meant staff knew children's individual needs and ensured they received care and support that was right for them. The addition of a child's 'all about me' booklet provided opportunities for children's contribution and involvement in their plan. This promoted children's voice and contributed to them feeling valued and respected.

Staff understood their role and responsibilities to keep children safe and participated in annual child protection training. They could share procedures for identifying, recording and reporting safeguarding concerns. A new member of staff told us, "The safeguarding training has really helped me in my role. I know what to look out for and I am confident in the procedures I need to follow and who to report to". This supported children's safety and wellbeing.

Appropriate storage and systems were in place to support the safe administration of medication. Children had individual asthma plans. These allowed more in depth detail to be recorded of children's signs and symptoms, and provided clear actions to be taken by staff in an emergency. We were satisfied procedures and processes in place were inline with current best practice guidance. This supported children's safety and health needs should they require medication.

Quality indicator 1.3: Play and learning

We evaluated this quality indicator as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Children benefitted from a pace of session that was relaxed and unhurried. Staff were responsive to children's interests and supported choice in where they played. This promoted children's choice in leading their own experiences. A group of children chose to play a board game. Staff enthusiastically played the game and used open ended questions and comments to extend children's play and learning. This supported children to have fun and be deeply engaged in the experience.

Children were excited to share with us the type of experiences they enjoyed. They told us "I like to play dodge ball and football in the gym hall. I like going to RAPPA (local park)" and "They teach us dances and help us learn new things". Regular access to the gym hall and local parks provided opportunities for children to engage in team games, risky play and develop their physical skills.

Experiences were a balance of planned and spontaneous activities. Planned learning was being recorded digitally. We advised evaluations of experiences would benefit from more detail of children's learning. This would support staff to identify skills children were developing and inform relevant next steps for their play and learning. Staff were responsive to children's requests, ideas and suggestions. This supported responsive learning to naturally happen throughout the session. This was not being recorded, we discussed with the assistant manager, the value of recording this to further support children's play, learning and development.

Learning was shared with parents through daily discussions. Children were encouraged to select something they were proud of and place a peg with a camera picture on it. This alerted staff that children wished to share this with their parents. Photos were taken and sent to parents through WhatsApp. This offered some opportunity for parents to be involved in their children's play and learning. We discussed with the assistant manager improvements could be made to enhance how children's learning was shared with their parents. The service had discussed this as part of improving family engagement and were considering the use of online platforms. We agreed this would be beneficial to ensure children's learning was shared in a more systematic and meaningful way with families.

How good is our setting? 4 - Good

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

Quality indicator 2.2: Children experience high quality facilities

The service was based within the local neighbourhood centre and shared the building with other groups and service users. Children's safety was a priority and measures were in place to support this. For example, staff completed and updated registers throughout the session. They were vigilant and ensured the playroom door was locked at all times and the glazed door and windows meant staff were aware of people approaching the playroom. This contributed positively to children's safety.

Children were cared for in a setting that was bright, clean and well maintained. Storage space was limited which meant some areas were cluttered. For example, the small kitchen area had items sitting on the work top, bags lying on the floor and there were empty cardboard boxes stacked at the main door. We discussed with the assistant manager the potential risk these posed to staff and children's health and safety. When we arrived on the second day of inspection areas had been tidied. We were satisfied steps taken had addressed any potential health and safety risks and contributed to a safe environment for children.

A wide selection of age and stage appropriate resources were available to children and were easily accessible. Additional resources were stored in cupboards. We observed children confidently ask for resources and staff immediately responded to their requests. This supported children's choice to enhance and extend their play and interests.

Children's experience was enhanced through regular use of the gym hall and good use of local parks and green spaces. During holiday periods children enjoyed visits to different places and parks around the city. This supported children's involvement in their local and wider community.

Displays were attractive and meaningful to children. For example, an emotions wall supported children to recognise and identify their feelings. Strategy ideas for managing emotions supported children to develop skills to support their emotional regulation and mental wellbeing. This sent the message to children that they mattered.

Children were encouraged to share their ideas and suggestions to develop the space. Children had created a vibrant, abstract mural on a large wall with different coloured paint. This gave children a sense of pride and ownership of the space.

How good is our leadership? 4 - Good

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

Quality indicator 3.1: Quality assurance and improvement are led well

The assistant manager was friendly, approachable and engaged well with the inspection process. They were receptive to feedback and willing to make improvements to ensure good outcomes for children and families. Staff told us they felt supported by leaders and could approach them if they needed help or support. This created a positive working environment and motivated staff to provide care to children and their families.

The service promoted a vision for the setting that showed their commitment to promoting children's rights. Aims and objectives prioritised children's freedom to make their own choices and decisions. We observed this to be reflected in practice. Staff respected children's ideas and suggestions and facilitated their choices. Children's voice was further promoted through the creation of a children's committee. This provided regular opportunities for children to come together and discuss their ideas and opinions for improving the service. Where safe to do so these were then actioned. This sent the message to children that their voice mattered. We discussed with the assistant manager that documenting actions taken would provide children with a visual record to see how their voice has influenced changed.

Leaders understood the importance of consultation with parents and sought their views through questionnaires, daily discussions and a suggestion box. Parents told us they felt involved in developing the service. One parent commented, "The manager is always asking verbally. There is a comments and suggestion box outside the service and there is an annual feedback form to shape the service too. The staff are always pleasant if you have any suggestions to offer". This supported parents to feel included in improving the service. We advised that feedback to parents from consultation would be beneficial to support their understanding of how their contribution had informed change.

We found self-evaluation was taking place against the Care Inspectorate document 'A Quality framework for the day care of children, childminding and school aged childcare'. This provided staff with opportunities to come together to reflect on current practice and identify key areas for improvement. This included more opportunities for family engagement. Consideration was given to strategies to support this, such as, stay and play sessions and online platforms. This was in the early stages and while the service was unable to see the impact, they had potential to improve and enhance engagement with families.

How good is our staff team? 4 - Good

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

Quality indicator 4.3: Staff deployment

Staff demonstrated a genuine warmth, kindness and interest towards the children they cared for. Parents commented positively about staff and told us, "The DASC has been an amazing service for my child and I. Having shared aims and actually working with me and my child to achieve them is making a positive impact" and "The staff are so nice and helpful. My child feels safe in the afterschool club environment and always talks about teachers in a good way". This contributed to meaningful and trusting relationships between staff, children and parents.

The service was appropriately staffed for the numbers of children in attendance. The assistant manager understood the importance of staff deployment to ensure effective supervision and safety of children. Staff worked well together as a team and were flexible in their approach. Ongoing communication between staff was used to support children's care and follow their interests. This contributed positively to team work to meet the needs of children.

Staff appraisals were taking place through discussions with the manager and training was identified to support staff development. We found improvements could be made to recording information to support and monitor staff's continuous professional development. This would allow the service to measure the positive impact of staff training on children's care, play and learning.

Safer recruitment procedures were being followed. Staff were appropriately qualified and one member of staff shared they were due to begin a qualification at a higher grade to support them in their promoted post. New staff told us they felt supported in their role by managers and other staff. An induction policy was in place and staff told us on their first day they were made aware of some procedures such as, child protection and fire safety. This supported children's safety and wellbeing. We advised the assistant manager that an induction checklist and use of the National Induction Resource would further enhance induction processes. This would further support staff's knowledge and confidence in their role to deliver positive outcomes to 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	5 - Very 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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