Stepping Stones For Families (Possilpark Family Centre)
Day Care of Children

Keppoch Campus
Possilpark Family Centre
65 Stonyhurst Street, Possilpark
Glasgow
G22 5AX

Telephone: 0141 336 2129

Type of inspection:
Unannounced

Completed on:
9 July 2026

Service provided by:
Stepping Stones For Families

Service provider number:
SP2003001274

Service no:
CS2003005914

About the service

Stepping Stones For Families (Possilpark Family Centre) is a service located in the Possilpark area of Glasgow. The service provides both daycare of children and after school care for school aged children. The service is registered to accommodate a maximum of 57 children aged from birth to 12 years. Of those 57 no more than 17 will be aged from birth to under three years, and no more than 40 aged three to 12 years. The service works in partnership with families to offer early learning and childcare, after school care and family support groups and outreach work within the local community.

The service is situated within Keppoch campus and is near to local shops, public transport links, parks and a library. At the time of the inspection 16 children were in attendance on the first day and 17 on the second.

About the inspection

This was an unannounced inspection which took place on 7 and 8 July 2026. 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 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 documents
- Observed practice and interactions
- Spoke to staff and management
- Reviewed feedback from 11 families.

As part of our inspections, we assess core assurances. Core assurances are checks we make to ensure children are safe, the physical environment is well maintained and that a service is operating legally. At the time of this inspection, no improvements were identified relating to core assurances.

Key messages

- Children were cared for by warm, kind and nurturing staff.
- Children were confident, comfortable and settled across the service.
- Staff were responsive to children's individual needs.
- Staff would benefit from additional support and training to enhance the quality of their interactions and engagement.
- Enhancements to resources and aspects of the learning environment would further enrich children's learning experiences.
- The service was committed to establishing and sustaining strong partnerships with families.
- Further development of quality assurance processes would strengthen outcomes for children.
- The children's changing areas should be improved to better support their privacy, dignity, and wellbeing.

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

Leadership	4 - Good
Children play and learn	4 - Good
Children are supported to achieve	4 - Good

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

Leadership 4 - Good

Quality indicator: Leadership and management of staff and resources.

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Staff and management were approachable, friendly and engaged positively throughout the inspection. They were committed to improving outcomes for children and families and were motivated to drive improvements forward to enhance children's experiences.

The service's values, vision, and aims were reflected in daily practice, and children were cared for safely and respectfully. These were developed to represent all Stepping Stones services and promoted a shared ethos across settings. Staff and families were informed of what was important to the service and how children's wellbeing, learning, and development were supported. This was shared through parent and staff handbooks. Although these were embedded well, involving children, families, and staff in reviews would strengthen inclusion and participation. This would help ensure the service continued to meet the changing needs of children and families who attended.

The service was continuing to build on their self-evaluation journey through the support from a consultant who was helping shape outcomes across all Stepping Stone services. Children, families and staff had actively participated in both formal and informal self-evaluation tasks including questionnaires, discussions during parent groups and consultations. Parents commented, "We have been asked for opinions and/or ideas a few times. The staff care and want to make this service the best it can be" and "I know my views will be heard to help develop service as Stepping Stones are about Families and children and all input is taken into consideration." These tasks had led to improvements including changes to children's mealtimes and new resources to support play, learning and development. The manager recognised self-evaluation as a shared responsibility and planned further support for staff to increase their involvement and confidence. This demonstrated a commitment to continuous improvement to enhance outcomes for children and young people.

A quality assurance calendar was in place and supported the auditing and monitoring of accidents and incidents, medication, chronologies and personal plans for example. Although this had led to improvements including identifying how the layout of a room was linked to an increase in accidents and the improvements to personal plan formats, more robust monitoring was needed. We discussed with the manager that a more robust approach to quality assurance, including playroom practice and environmental monitoring, would strengthen consistency. This would ensure children experienced a well-managed, nurturing, and high-quality learning environment to support their wellbeing, development and learning.

Although chronologies were monitored and this ensured any information was recorded and actioned appropriately, improvements were needed to ensure the service was fulfilling its statutory duty to notify the Care inspectorate of significant events. An area for improvement was made to address this. (See area for improvement 1).

An improvement plan was in place and had led to improvements across the service. This included enhanced transition in-house, between the nursery on campus and the three primary schools where the out of school children attended.

Parent initiatives were in place and had led to newly formed groups to continue to support families using the service. The manager was open and transparent about aspects of the improvement plan that had not yet been achieved and future plans to carry this forward. This included improvements to the outdoor space and home learning. These plans had the potential to further improve outcomes for children.

Staff were safely recruited in line with current guidelines and legislation ensuring that they were suitable to work with children. New staff spoke positively about the induction process and the support they received from management and playroom staff. Informal mentoring was in place to support new staff along with induction processes that covered nursery routines, child protection procedures and health and safety. The manager shared that they had previously used the National Induction Resource to shape their induction processes. We discussed looking at this in more detail would ensure new employees and mentors had a better understanding of their role. This would also support the identification of individual strengths and development needs, helping to improve professional practice and positively impact outcomes for children's care and learning.

Areas for improvement

1. To support better outcomes for children, the provider and management should ensure they fulfil their statutory duties of notifying the Care Inspectorate, and any relevant authorities, of significant events.

This should include but not be limited to protection concerns in relation to a person using a service, accidents and outbreaks of infectious diseases.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. (HSCS 3.0).

Children play and learn 4 - Good

Quality indicator: Playing, learning and developing.

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were happy, settled, and confident throughout the setting, demonstrating a sense of security and belonging. They moved independently between play spaces, including outdoor areas and soft play, and engaged quickly in activities. This supported confidence, decision-making, and independence. Children accessed a range of resources that effectively supported play, learning, and development. These included construction materials, books, puppets, indoor physical equipment, and arts and crafts resources. The resources promoted literacy, physical development, creativity, and problem-solving skills. While resources supported learning, we discussed introducing more natural and open-ended materials to enhance experiences further. This would encourage imagination, exploration, critical thinking, and deeper engagement in child-led play.

Staff interactions were responsive to children and showed positive relationships. Younger children looked for staff to join in play and staff quickly responded. Staff praised and encouraged children throughout interactions and actively listened to them. Older children's play was supported by staff who joined in and had fun with them. This showed children they were valued and respected.

Staff effectively supported children's play through warm interactions and active participation. Opportunities remained to further extend learning through more consistent use of questioning and scaffolding techniques. For example, some adult-led experiences could have been available for longer to allow children to revisit, consolidate, and deepen their learning. We discussed with the manager that further staff training would strengthen knowledge and skills in supporting play. This would help staff build on children's interests more effectively and further enhance learning and development outcomes.

Although children did not have direct access to the outdoors, they had opportunities to play outside at times throughout the day. The youngest children who attended in the morning only, used local parks and walks to ensure they have opportunities to be in nature and access fresh air. The other children including the after-school children used the school grounds and pitch for outdoor play. Parents shared, "My child has a wide range of outdoor experiences through the nursery, including visits to the local park, exploring the nursery's outdoor play area, and spending time discovering the local environment and surrounding community. I love hearing about the different adventures she has been on when I collect her each day." and "My child loves coming in to nursery and she loves all the activities they do each week, she hasn't stopped going on about a bear hunt for the past week as she really enjoyed taking part." Although children accessed outdoors daily we discussed with the manager that outdoor learning could be enhanced through a wider range of accessible resources. Resources linked to individual interests would increase engagement and support deeper learning opportunities. This would help ensure children experienced a broader range of learning outdoors, beyond physical play, supporting creativity, curiosity, and problem-solving skills.

Planning approaches were in place and linked to relevant guidance, including Realising the Ambition and the Play work Principles. Planning for older children reflected children's interests, giving them choice and control over their play. Staff also used children's interests and agreed next steps with parents to inform experiences for younger children. This supported engagement and positive partnerships with families. While themes such as dinosaurs and the beach reflected younger children's interests, experiences often focused on adult-led art activities for wall displays. We discussed that providing a wider range of play experiences would offer children more opportunities to develop curiosity. This would have enabled children to explore their interests more deeply and achieve a broader range of learning outcomes. We also found that a better balance between adult-led and spontaneous experiences would have enriched learning opportunities and supported more responsive, child-led learning.

Children's learning and development were shared with families through an online platform, promoting effective communication and keeping families informed of their child's experiences. Observation systems were established and supported the recording of learning. Further development of these approaches would help improve consistency in documenting children's progress, achievements, and next steps. This would ensure records more accurately reflect each child's individual learning journey and inform responsive planning to support ongoing development.

Children are supported to achieve 4 - Good

Quality Indicator: Nurturing care and support.

We evaluated this quality indicator as good, where there were important strengths within the setting's work and some aspects which could benefit from improvement.

Children were cared for by kind, nurturing, and responsive staff who supported their wellbeing effectively. Children received comfort, reassurance, and affection when needed, helping them feel safe and secure. Fun and laughter were evident throughout interactions. For example, children attending after-school care enjoyed chase games with staff, resulting in lots of giggles and enjoyment. As a result, children developed positive relationships, which supported their confidence, emotional wellbeing, and overall development. Parents shared, "The staff at stepping stones are absolutely lovely I couldn't ask for better people to look after my child. They create such a warm and welcoming environment for all of the children." and "The staff have always been amazing not only in caring for my little girl but if there was anything I needed they were always willing to go the extra mile."

Staff knew children well and could discuss individual needs and the support they provided. This helped children feel understood, valued, and secure, promoting confidence and wellbeing. Due to vacancies and staff absences, staff regularly moved between playrooms to support children across the setting. While this helped children build relationships with a wider range of staff, it sometimes reduced consistency in care and support throughout the day. We highlighted that minimising staff movement where possible would help strengthen continuity, provide greater stability, and further support children's emotional security and wellbeing.

Mealtimes across the setting were relaxed, unhurried, and sociable experiences that supported children's wellbeing and enjoyment. Children confidently followed good hand hygiene routines before and after eating, promoting their health and independence. Opportunities to develop self-help skills were embedded throughout mealtimes. For example, children in the toddler room served their own lunch, while children attending after-school care prepared their own snacks. These experiences supported confidence, independence, and decision-making skills. Staff remained with children throughout mealtimes, providing encouragement and ensuring safety while promoting positive social interactions.

Personal care routines were carried out sensitively, and staff sought children's permission before changing nappies, wiping faces, or changing clothes. This demonstrated respect for children's dignity, choice, and individual rights. Staff followed infection prevention and control procedures appropriately, including during nappy changing and the application of sun cream. While nappy changing procedures were carried out in line with best practice, the changing facilities did not fully reflect current guidance. For example, in the baby room, the changing area was not fully separate from the main play space, which reduced privacy and dignity and increased the potential risk of infection transmission. We therefore made an area for improvement to address this and further enhance outcomes for children. (See Area for Improvement 2).

Personal plans were in place for all children and contained important information, including emergency contacts and medical needs. Plans were being transferred to a new format, making information easier to access, update, and review. The revised format included space for regular updates, six-monthly reviews, and individual targets, supporting children's ongoing progress and development.

Children requiring additional support had detailed plans and, where appropriate, personal risk assessments. This helped ensure their individual needs were identified, understood, and met effectively, promoting inclusion, wellbeing, and positive outcomes.

Connection with families was a strength of the service and staff showed positive respectful relationships with families using the service. Families were warmly welcomed into the setting and staff took time to share updates with them. The service supports families through weekly parent and baby sessions as well as cooking classes and support groups. These opportunities helped families feel valued, listened to, and supported. This strengthened positive partnerships between families and staff, promoting consistency in children's care and learning. One parent shared, "All the staff go above and beyond to help families in the centre, they are understanding about every situation and helping families in every way they can."

Areas for improvement

1. To ensure children's personal care needs are met in a way that upholds their privacy and dignity, and to support effective infection prevention and control practices, the provider should improve the children's changing areas.

This is to ensure the service complies with the Health and Social Care standards (HSCS) which state: 'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected (HSCS 1.4) and If I require intimate personal care, there is a suitable area for this, including a sink if needed (HSCS 5.4)

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

The service should continue to develop children's personal plans. Children's personal plans should include information about children's potential next steps and the support provided by the staff team to support children to achieve these goals.

Health and Social Care Standards My life, my support
1.15 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.

This area for improvement was made on 12 February 2019.

Action taken since then
All children had personal plans in place which provided staff with information to meet their individual needs. Plans contained relevant information for children requiring additional support and clearly identified how staff would respond to these needs. Individual next steps and targets had been identified, supporting a consistent approach to promoting children's learning, development, and wellbeing.

This area for improvement had been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.scot.

Detailed evaluations

Leadership	4 - Good
Leadership and management of staff and resources	4 - Good

Children play and learn	4 - Good
Playing, learning and developing	4 - Good

Children are supported to achieve	4 - Good
Nurturing care and support	4 - Good

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