Kingfisher Club - Kestrel House
Day Care of Children

Linlithgow Primary School
Preston Road
Linlithgow
EH49 6HB

Telephone: 07760768565

Type of inspection:
Unannounced

Completed on:
10 September 2026

Service provided by:
Kingfisher Club

Service provider number:
SP2003003097

Service no:
CS2003013319

About the service

Kingfisher Club - Kestrel House is a day care of children service registered to provide care to a maximum of 120 primary and secondary school aged children up to the age of 16 years at any one time.

The service mainly operates within Linlithgow primary school which is close to local shops, parks and other amenities. Children have access to a playroom, dining area, large gym hall, toilets and the school playground.

About the inspection

This was an unannounced inspection which took place on 8 September 2026 between 14:30 and 17:55 and 9 September 2026 between 14:35 and 17:20. 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
- received feedback from 12 families
- spoke with staff and management
- observed practice and children's experiences
- reviewed documents.

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

- Leaders had created a culture of continuous improvement with an appropriate pace of change.
- Quality assurance processes and self-evaluation had been developed and were supporting improvement.
- Children were happy, relaxed and having fun. Staff enabled children to lead their play experiences and were responsive to their cues.
- Children experienced warm, kind and playful interactions from staff.
- Staff and children had reflected together on the snack experience which had resulted in positive changes.
- Leaders had begun to develop their approach to personal planning to provide children with more opportunities to be involved. There was scope to further develop personal plans to include more detailed information.

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

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.

Leadership and management of staff and resources

Leaders had created a culture of continuous improvement with an appropriate pace of change. This meant that all staff were included on the improvement journey and changes resulted in improvements. Leaders planned to redesign the vision, values and aims of the service with children, families and staff to create a shared understanding.

The improvement plan had been reviewed to create focused and realistic key priorities. Clear actions had been identified and implemented, to support all staff to take forward changes which brought about positive change for children. Quality assurance processes and self-evaluation had been developed and were supporting improvement. For example, frequent observations of children's snack experience had been carried out effectively, which helped staff to reflect on practice and make changes which led to improvement. We discussed how leaders could now build on this reflective approach to inform improvement across other aspects of children's care, play and learning experiences. Leaders had identified that there was scope to now use the 'Quality Improvement Framework' challenge questions to reflect more deeply on practice and support ongoing improvement.

Most families told us they were involved in a meaningful way to help develop the service. Feedback was valued, listened to and used to inform and influence changes within the setting. As a result, this enabled leaders and staff to identify strengths and areas for development. For example, children gave regular feedback on what they liked and did not like about the new snack experience. Staff used this to make changes to the layout and snack routine to create a more social snack where children had increased opportunities to be independent.

Staff were safely recruited with appropriate checks carried out before staff started in their role. To further develop recruitment processes, we signposted the manager to 'Safer recruitment, through better recruitment' guidance, to support them to strengthen record keeping, for example around formal recording of interviews.

The service were in the process of notifying the Care Inspectorate regarding changes to committee members. We advised that this is carried out as a matter of priority to ensure children were safe and protected.

Children play and learn 4 - Good

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.

Playing, learning and developing

Children were happy, having fun and enjoyed playing together in small groups and individually. Staff enabled children to solve problems for themselves and offered support when needed. They encouraged positive interactions between children which helped them to develop social skills.

Free flow opportunities between the indoors and outdoors enabled children to make independent choices about where they played. Staff enabled children to lead their play experiences. They were responsive to children's cues, joining in with play experiences when invited or when they recognised children would benefit from engagement. Staff supported children, for example role modelling, how to use resources and offering praise and encouragement. This helped children to develop confidence, be successful and celebrate their achievements.

Children experienced a range of play opportunities including physical, active play, imaginative play and had opportunities to be creative. There was scope to continue building on the experiences available, for example, offering real life resources, such as tools to inspire children and support them to develop life skills. Families commented positively on the play experiences. They told us, "There's a wide selection of things to do each day and the children have freedom to decide" and "My child gets to do a range of activities that they enjoy." A few families told us they would like children to have more experiences in the wider community, particularly during the holidays. We shared this with the service to consider ways to improve this.

Children were encouraged to follow their interests at a pace which was right for them. Staff were responsive to children, for example, creating spaces within the environment for children to extend and continue their interests. Some children had begun to identify activities they would like to get better at. Staff had plans to gather this feedback from all children. Children would benefit from staff using this information to plan fun, challenging play experiences based on their individual interests to support them to develop a broad range of skills.

Children are supported to achieve 4 - Good

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.

Nurturing care and support

Children were happy, relaxed and confident. They were warmly greeted by staff on arrival at the club which created a relaxed and welcoming ethos. Children told us they enjoyed coming to the club. They said staff were 'amazing', 'nice' 'very kind and do lots of fun things.' They experienced warm, kind and playful interactions.

Staff noticed when children needed extra support and responded to them offering comfort and reassurance in a sensitive way. Children were well supported by staff to develop friendships across a range of ages which created an inclusive environment.

Transitions from school were well planned and effectively managed. For example, consistent staff collected younger children to support continuity of care. Staff knew children well and they had begun to work with the school to support consistent use of strategies for some children. There was scope to continue to build on this approach to improve information sharing to support children's daily experiences.

Leaders had begun to develop their approach to personal planning to provide children with more opportunities to be involved. Staff were in the process of implementing this for all children, to enable them to have an active and meaningful way of sharing important information about themselves. Basic registration information had been recorded. We discussed how this could be more detailed, for example, including changes to children's wellbeing to identify if additional support is needed. Staff had a good understanding of strategies of support for individual children. Children would benefit from these strategies being clearly recorded in personal plans to support consistent practice across the staff team.

Staff and children had reflected on the snack experience and made positive changes. As a result, children enjoyed a relaxed and social snack experience. They had a selection of nutritious food choices which supported them to be healthy. Opportunities for independence had been increased. This included pouring their own drinks and self-serving which helped them to develop skills for life.

Medication processes were in place which supported children's medical needs to be safely met. There was scope to further strengthen this through more detailed recording of symptoms and improved communication about any medication administered prior to attending the club.

Families were warmly welcomed into the setting at pick up which supported them to develop positive relationships with staff. They told us they knew staff well and found them approachable. Staff recognised the value families brought to develop the service and were trialling different methods of communication. As a result, they were beginning to have increased engagement with families which supported improved outcomes and experiences for children.

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 development and enable them to experience a rich and enabling environment, play spaces should offer a range of resources and materials to effectively challenge and stimulate children and reflect their current interests and curiosities.

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 for my age and stage, which stimulate my natural curiosity, learning and creativity." (HSCS 2.27).

This area for improvement was made on 4 December 2025.

Action taken since then

Children had access to a range of resources and materials which reflected their interests and supported their development. As a result, children were having fun and engaged in meaningful play experiences.

This area for improvement has been met.

Previous area for improvement 2

To ensure children receive high-quality care and support, quality assurance and self-evaluation methods should be further developed. Opportunities should be created to formally gather and include childrens' and families' views. This will help to identify areas for improvement that will impact positively on outcomes for children.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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 27 June 2024.

Action taken since then

Quality assurance and self-evaluation processes had been developed and were having a positive impact on improving outcomes for children. Childrens' and families' views were gathered and used effectively to influence and make improvements.

This area for improvement has been met.

Previous area for improvement 3

To provide the best possible outcomes for children, the service should ensure staff engage in mandatory and relevant training opportunities to keep their knowledge and understanding current. This should include but is not limited to, updated Child Protection training.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high-quality care and support that is right for me, and is based on relevant evidence, guidance and best practice." (HSCS 4.11).

This area for improvement was made on 27 June 2024.

Action taken since then

Staff had completed training, such as child protection and first aid to keep children safe. Staff had developed their knowledge and understanding of safeguarding and were confident in their role to protect children. There was scope for leaders to access additional, more in depth child protection training, to support them in their lead safeguarding role.

This area for improvement has 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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