St. Aloysius College (RC)
Day Care of Children

St. Aloysius College Campus
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Telephone: 01413 319 262

Type of inspection:
Unannounced

Completed on:
12 November 2025

Service provided by:
St. Aloysius College (RC)

Service provider number:
SP2003003574

Service no:
CS2003016188

About the service

St Aloysius College (RC) kindergarten operates from purpose built accommodation within the school campus in Glasgow city centre. The early learning and childcare service is in partnership with Glasgow City Council, to provide commissioned places for children aged between three and five years.

The service can accommodate a maximum of 40 children aged three years to those not yet attending primary school. There were a total of 28 children present on both days of our inspection.

The accommodation consists of one large playroom divided into two levels. The lower level provides direct access to an outdoor play area. Stairs within the playroom lead to an upper level, offering additional space for mealtimes and activities. The children have access to a range of school facilities across the campus to extend their learning experiences, for example the gym. There are toilet facilities for children and office, catering and staff facilities. The service is close to schools, transport routes, shops and community services.

About the inspection

This was an unannounced inspection, which took place on 11 and 12 November 2025. The inspection was carried out by two inspectors from the Care Inspectorate. One inspector was shadowing as part of their induction process. 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 feedback from nine parents and carers whose children attend the service
- reviewed feedback from 11 staff members employed in the service
- spoke with management and staff
- observed practice and staff interactions with children
- 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.

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, improvements were identified relating to core

assurances. We have reported where improvement is necessary within the 'Leadership' section of this report.

Key messages

- Leaders had developed a shared vision for the service focused on improving outcomes for children.
- To ensure children's safety, staff recruitment processes needed to be strengthened.
- Children were happy, settled and confident.
- Children's learning was enhanced through extra curricular activities within the school setting.
- Records of children's progress in learning could be strengthened to help staff plan to meet their development needs more fully.
- Kind and nurturing interactions from staff helped children feel feel nurtured and emotionally secure
- We identified improvements that would minimise infection risks for children's health 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.

The service had reviewed their vision, values and aims in consultation with children, their families and staff. We noted their suggestions had been taken forward. This sent a message that their views were valued. A wall display in the reception area clearly communicated the service's ethos. Observations confirmed these values were embedded in daily practice contributing to a positive environment for children.

The manager was committed to initiate change by involving and recognising the contributions of families and staff. Staff were actively supported and engaged in the settings improvement journey and self-evaluation exercises. This contributed to creating a collaborative approach to development, with their views and contributions listened to and valued. This approach enabled the identification of both strengths and areas for development, leading to agreed improvement actions. Self evaluation undertaken had impacted on improved outcomes for children. For example, mealtimes had been strengthened to provide a rolling mealtime experience for children and developments to their outdoor space had been taken forward to improve outcomes for children.

A parent's forum was established contributing to supporting parents to provide feedback on the service and the sharing of information. Parents views were sought and considered, particularly regarding service enhancements such as menu development. This collaborative approach ensured that staff had the necessary information to meet the needs of children and families.

Children were being consulted, and their thoughts and feelings were considered in relation to their play experiences and resources within the setting. This was particularly evident within curricular plans where children helped plan play experiences that met their interests. We discussed with management the opportunity to extend this further by including children's voices within other areas of the service. For example, when making changes to playroom environments to support children's rights in shaping and developing their kindergarten.

Child protection procedures were in place. All staff had attended child protection training. They were aware of their responsibility to safeguard children in their care and had the ability to recognise when children and families needed support. While information was recorded within children's files to include next steps and actions, the chronology record could be strengthened to ensure information is captured in a more streamlined and easily accessible format.

The service was using a quality assurance calendar to monitor and audit aspects of the service. Management carried out monitoring of staff practice and identified strengths and areas for improvement to support with improving outcomes for children. Management could extend the opportunity of monitoring further by including areas such as infection prevention and control, the quality of children's personal plans and medication auditing. This has the potential to support with continued improvements to outcomes for children and their families.

Sampling of staff recruitment files confirmed that safe recruitment checks were in place for almost all staff.

However, one staff member commenced employment before references were reviewed, which does not align with best practice. As this poses a potential risk to safeguarding, an area for improvement has been identified.

(See area for improvement 1).

Areas for improvement

1.

To ensure that children are protected from harm, the provider should make sure that all staff are safely recruited. This should include, but is not limited to verifying staff suitability through appropriate checks and maintaining accurate records.'

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

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This is to ensure safe recruitment procedures are consistent with the Care Inspectorate and Scottish Social Services Council guidance 'Safer Recruitment Through Better Recruitment.'

Children play and learn 4 - Good

Play, 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 embraced their right to play and were happy. They demonstrated confidence and independence by leading their own play and learning, supporting their overall development and well-being. We observed children were engaged in a variety of quality play and learning experiences for prolonged periods of time, showing high levels of engagement, excitement, wonder and joy. Children told us, they like playing with their friends and teachers.

Children were provided with meaningful opportunities to develop their language, literacy, and numeracy skills. They explored magnets to build structures, engaged with books and identified and described sea creatures. They also particularly enjoyed participating in imaginative play, using props to prepare meals for baby dolls.

Children's creativity was promoted through involvement in art experiences. Artwork displayed on the walls showcased children's work, creating an environment where children felt valued for their work. Some experiences had involved use of predefined templates. We discussed with staff the benefits of removing templates, maximising opportunities for children to be curious and lead their own creative ideas.

Children benefitted from engaging in extra-curricular activities within the school setting, such as physical

education. We observed that children demonstrated enjoyment and active participation while learning Scottish dancing. One parent told us, "Learning is focused around what the child wants to do rather than forced upon them. Variety of specialist subjects - PE, outdoor forest school, science, music, Spanish etc."

All children had opportunities to play and learn outdoors to support their health and wellbeing. Free-flow access to an outdoor area enabled children to make choices based on their interests. The environment also offered opportunities for positive risk taking and challenging play, supporting the development of confidence, resilience, and problem-solving skills.

Staff joined in with play and were responsive to children's interests. They were skilful in knowing when to step back from play and join in again to spark children's interest and curiosity. Staff recognised where further challenge would be beneficial and equally, where support was required. This meant staff could respond meaningfully to children's needs and wishes and supported children's overall wellbeing and sense of belonging.

Staff were responsible for planning experiences for children within designated play areas. Children were consulted in this planning, ensuring experiences were tailored to their interests. This contributed to a high level of engagement in experiences where children were exploring their ideas. Staff were using a curriculum framework and development trackers were in place to monitor and record children's development and progress.

Families received information about their child's care, play and learning through an online platform. Some observations of children's learning demonstrated their skills and highlighted next steps for learning. To strengthen this approach, greater consistency in recording observations would be beneficial. In some cases, observations did not fully reflect children's individual skills or include next steps to support their learning and development. A few entries contained similar information for different children, reducing personalisation. Ongoing monitoring of learning journals, combined with dedicated reflection time could help staff refine observation practices and ensure children's progress is captured effectively over time.

Children are supported to achieve 4 - Good

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's care and learning routines were delivered with kindness and compassion from staff who were warm, nurturing and caring towards children. This supported children to feel safe, secure, and contributed to the positive relationships they had. Staff knew their children and families well and had created a warm and welcoming environment supporting them to feel valued. All parents provided positive feedback and told us, "The standard of care and education is truly superb. Each member of staff seems to love their work and genuinely care for each of the children as though they were their own" and "The staff are so friendly and you can see they generally care about the children."

A rolling lunch time experience for children supported children's play to come to a natural end before transitioning to lunch. Mealtimes were a relaxed and unhurried experience with staff supervising children, contributing to a safe mealtime experience. There were opportunities for children to make choices and develop independence at lunch time. For example, they cleared away their own plates and chose what they

wanted to eat. Children enjoyed social interaction during lunch by sitting with friends and chatting. We suggested ways to make lunch more sociable , including creating more opportunities for staff to join children at the table. This could better support staff to meet children's needs.

Health care plans supported staff to meet children's health and wellbeing. We discussed with the manager the need for clear medication labelling and administration logs include the dosage of medication administered. Implementing these measures could improve medication safety and ensure children's wellbeing remains a priority. We were confident these actions would be taken promptly by the management team.

Many infection control practices promoted a safe environment for children. For example, environments were clean. However children and staff needed to wash their hands more consistently to prevent the potential spread of infection. We also asked staff to clean lunch tables between sittings to reduce the risk of cross contamination.

Personal plans were in place for children and developed in partnership with families and children. Plans were reviewed regularly, which contributed to enabling staff to support and meet children's individual needs. Plans could be further strengthened with clear goals and targets and include information of how staff will support children's development and progression.

We observed positive practice where families joined a planned playroom session with children and staff. During this experience we observed positive engagement and collaborative relationships to meet children's needs. Although families were welcomed for focused sessions, they did not routinely enter the playroom at drop off and collection times. We encouraged inviting families into the playrooms each day to to strengthen relationships and enhance feelings of belonging and involvement.

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

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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