Scone Kids Club
Day Care of Children

RDM Primary School
Spoutswell Road
Scone
Perth
PH2 6RS

Telephone: 01738 459 698

Type of inspection:
Unannounced

Completed on:
22 September 2026

Service provided by:
Perth & Kinross Council

Service provider number:
SP2003003370

Service no:
CS2003038929

About the service

Scone Kids Club provides a school-aged childcare service in Scone. The service is registered to provide a care service to a maximum of 50 children at any one time, aged from four and a half years to 14 years (if attending primary school). The service operates from the dining hall within the premises of Robert Douglas Memorial Primary School. The total number of children registered with the service at the time of the inspection was 88.

Children have access to a dining hall, gym hall, playground, and wooded area. The service is situated in a residential area of Scone, close to shops, parks, and public transport.

About the inspection

This was an unannounced inspection which took place on 22 September 2026 between 08:00 and 12:00 and 14:00 and 18:00. Feedback was shared with the service on 23 September 2026. This 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke/spent time with children using the service
- spoke with two families using the service and received 11 completed questionnaires
- spoke with five staff and the manager
- assessed core assurances, including the physical environment
- observed practice and daily life
- 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

• Quality assurance processes had improved and were beginning to support the development of meaningful improvement priorities.

• Further developing the service induction processes would ensure shared expectations between leaders and staff.

• Children's safety had improved as doors were now alarmed and effective registers maintained their supervision.

• Most children were engaged in their chosen play experiences, having fun with their friends.

• Further developing how families are welcomed into the service would support them to feel included as part of their children's experiences.

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 thrive and develop in quality spaces	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 vision had been developed with staff and children, helping to create a shared sense of purpose. Families shared mixed views regarding their involvement in the service. Some spoke positively about the use of QR codes to share information, whilst others felt less involved. Moving forward, leaders should now strengthen opportunities for families to contribute to the development and review of the service vision. This would support the service values to be consistently understood and reflected in practice across the setting.

Quality assurance and self-evaluation had improved since the last inspection. Improvement priorities had been developed and included enhancing the quality of play-based learning and were specific to the service needs. Evaluations of progress would benefit from further development to ensure these meaningfully and accurately reflect the impact of actions taken. Staff had engaged with best practice guidance and frameworks and should now use this learning to drive forward effective improvements. This would support the service to identify what is working well and any changes to enhance their service improvement.

Monitoring activities identified appropriate actions for improvement and leaders were responsive in addressing issues when identified. More robust follow-up arrangements, including observations of staff practice, children's engagement and the quality of interactions, would support leaders to better measure the impact of actions. This would help to promote greater consistency across the service.

A range of policies and procedures were in place to support practice. We suggested where some documents could be updated to ensure they fully reflected current legislation, guidance, and practice. Ensuring policies are current and fully understood by staff would strengthen governance arrangements.

Staff felt supported through induction processes and by the existing team. Staff told us the Perth and Kinross Council induction Padlet was informative and helped them become familiar with their role. Moving forward, it would be beneficial for leaders to consider a more reflective and centre specific induction program. This would help staff know what is expected of them within their service and leaders' confidence that staff understand their roles and responsibilities.

Quality Indicator: Staff skills, knowledge, values, and deployment

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 worked well together and demonstrated a positive commitment to supporting children and families. A parent commented, "All staff are helpful, and will speak when time allows." They were friendly, enthusiastic and had developed positive working relationships across the team. Staff spoke proudly about improvements made since the last inspection and their collective efforts to enhance outcomes for children. As a result, children and families benefited from a welcoming service with a positive and collaborative ethos.

Staff were attentive to children's needs and provided appropriate supervision throughout breakfast and after school club sessions. Effective communication systems supported children's safety and wellbeing. Staff used walkie-talkies to communicate when children moved between indoor and outdoor areas and when accessing toilet facilities. We recognised that the service had experienced staffing changes and challenges in recruitment. Despite this, staff remained committed to maintaining positive experiences for children. Although staffing ratios were maintained, we discussed the benefits of continuing to review staff deployment, particularly during breakfast club sessions. This would further support children's safety, security, and overall experience.

Staff participated in a range of professional learning opportunities to develop their knowledge, skills, and understanding. This included mandatory training and learning linked to identified improvement priorities. Staff were beginning to reflect on how training influenced their practice. They shared examples of how learning had enhanced their understanding of positive interactions and children's behaviour. To strengthen this further, the service could develop a more consistent approach to evaluating the impact of professional learning. This would help ensure learning is effectively embedded and shared across the staff team contributing to positive outcomes for children and families.

Clear systems were in place to support staff in their roles and responsibilities. Rotas for the after-school club identified specific duties. These included attendance monitoring, infection prevention and control, snack provision, and planned activities. This contributed to children's safety, wellbeing, and engagement throughout sessions.

Children thrive and develop in quality spaces — 4 - Good

Quality Indicator: Children experience high-quality facilities

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 benefited from a well-maintained, safe and secure environment. A secure door entry system helped to support children's safety and wellbeing. A parent commented positively and shared, "Buzzer system and regular staff to oversee the door system are good." Effective attendance procedures were in place, including the use of registers for breakfast club, after school club and outdoor play. Staff communicated effectively to ensure they were aware of the number and location of children throughout the session. As a result, children were always accounted for and experienced a safe and organised environment.

Outdoor spaces provided children with valuable opportunities to be physically active, develop resilience and engage with the natural world. Children accessed an extensive playground and woodland area where they could explore, build, climb and work collaboratively. These experiences supported their physical development, confidence, and wellbeing. Risk assessments were in place to support children's safety. To strengthen practice further, staff should ensure that dynamic risk assessments consider boundaries within spaces. Staff should further develop risk-benefit approaches that support children to experience challenge and adventure safely. Greater involvement of children would further develop their confidence, responsibility, and decision-making skills.

Indoor environments offered opportunities for children to relax, be creative and engage in imaginative play. The recent introduction of loose parts resources was beginning to enhance children's play experiences by increasing choice and encouraging creativity. There was scope to continue reviewing and developing indoor resources and spaces. We discussed how some areas could be enhanced to create a more welcoming and cosy atmosphere. This would ensure that they consistently provide rich, meaningful, and high-quality play experiences for all children.

Children's views were valued and contributed to the development of the environment. Staff sought children's ideas when designing spaces, and children spoke positively about areas that had been developed in response to their suggestions. For example, older children talked enthusiastically about the P6/7 area. A sensory tent had been introduced to support emotional regulation and wellbeing. Reviewing the effectiveness of spaces with children would ensure they remained relevant, inclusive, and welcoming.

The service demonstrated a commitment to supporting inclusion and meeting children's individual needs. Staff were aware of children who required additional support, including those with English as an additional language. Plans were in place to promote diversity, inclusion and belonging through experiences, celebrations, and learning opportunities. Continued development of these approaches would further strengthen children's understanding of diversity and help to ensure all children feel valued and included.

Children accessed toilet facilities that were clean, well-maintained, and appropriately ventilated. Improvements had been made to enhance the quality of these facilities. We discussed opportunities to further strengthen arrangements by ensuring ventilation is consistently maximised. We discussed considerations to ensure that toilet facilities were prepared and ready for use by children attending the after-school club. The service responded positively to these suggestions which demonstrated a commitment to ongoing improvement.

Infection prevention and control measures had improved. Children and staff were observed washing their hands at appropriate times to help reduce the spread of infection. Families also supported children to follow these routines, demonstrating a shared understanding of the importance of hygiene practices. Further quality assurance measures would help to ensure these approaches were consistently embedded across all aspects of practice and in line with the service's procedures. We asked that the service consider the types of bins in place to help to reduce the potential risk of the spread of infection. This would further support appropriate infection control measures.

Children's personal information was stored securely. This supported confidentiality and protected their privacy.

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 experienced a welcoming environment where they enjoyed spending time with their friends and engaged in a wide range of play and learning experiences. They spoke positively about attending the service, sharing that they enjoyed opportunities to play with friends. A calm and positive atmosphere supported most children to engage in sustained play throughout the session.

Children had opportunities to influence their experiences and demonstrated confidence in leading their own play and learning. They regularly contributed ideas through planning processes. Staff used mind maps and floor books to gather children's views and interests. A parent commented, "Child gets opportunities to socialise, play and do a range of activities set out by the staff." Children were observed leading activities, sharing skills with their peers, and working collaboratively to develop ideas. For example, one child confidently led a group activity, demonstrating how to draw a zombie, while others chose to join and participate alongside them. Voting processes further supported children's participation in decision-making. This helped them to influence their play choices.

Children developed a range of skills through their play. They were observed problem solving and applying their knowledge during experiences. For example, ordering dinosaurs by size, using information books to extend their understanding, participating in board games, and creating complex marble runs. Younger children learned from older peers, demonstrating positive relationships and opportunities for peer learning. This supported children to sustain their interests.

Children benefitted from regular access to natural spaces where they explored, built, climbed, balanced, and engaged in adventurous play. They demonstrated confidence, resilience, and teamwork as they worked together to construct dens and balance structures using loose parts and natural materials. Staff generally encouraged children to solve problems independently and used questioning to support their thinking and decision-making. Children spoke enthusiastically about outdoor experiences. One child told us that they felt they had more opportunities attending kids club, "I like playing football. I wouldn't join a club, but I like that I can play it here." As a result, play experiences positively impacted children's engagement and motivation.

Staff valued children's achievements and interests. They celebrated children's efforts by photographing creations and recognising the importance of preserving and acknowledging children's work. Positive interactions supported children's choices and independence. This enabled children to experience success and pride in their achievements.

Planning approaches demonstrated a commitment to child-led practice. We discussed where evaluation processes were not yet fully effective in demonstrating the impact of experiences on children's skills and development. Previous planning records evidenced stronger examples of children's voices, family involvement, and evaluative thinking. This would help ensure planning was responsive to children's interests and clearly demonstrate how experiences contribute to positive outcomes.

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 experienced warm, caring, and responsive support from staff who knew them well and were committed to promoting their wellbeing. A parent commented, "Staff are friendly and welcoming." Children arrived confidently at the service, independently hanging up their belongings, washing their hands, and settling into activities of their choice. Staff interacted sensitively with children throughout routines, respecting their preferences and supporting them to make choices. This helped children to develop a sense of belonging within the service.

Positive relationships and transitions supported children's wellbeing and confidence. Older children were encouraged to take on responsibilities and support younger children during transitions to school. Families were warmly welcomed and information was shared, as requested, at drop-off and collection. A parent commented, "The service is great and staff are approachable. Feedback is usually ok at the end of the day but not always given unless I ask." Moving forward it would be beneficial to review these transitions within quality assurance processes. This would ensure that families are provided with meaningful information on their child's day. Strengthening transitions would help to positively impact children and families.

Personal planning systems provided staff with relevant information about children's needs and preferences. Children and families were actively involved in updating these records. This helped staff gain a better understanding of their interests, preferences, and experiences. We discussed opportunities to further strengthen these records to ensure they provide a more comprehensive picture of children's wellbeing, strengths, and support needs. Registration information should be reviewed to ensure emergency contact information is accurate and consistent. This would further protect children's wellbeing.

Staff had gathered good information to enable them to understand children's individual needs. Children who required extra support had strategies in place, and we encouraged staff to build on these approaches. This would help ensure staff provided consistent care and support. This would include ensuring that information is clearly understood and interpreted consistently by all staff. This would help to ensure approaches provided timely and responsive support for children. The service were beginning to consider rights-based language within their processes and we asked them to ensure information protects children's identity. This would support an inclusive approach to meeting children's needs.

Staff were beginning to develop their understanding of chronologies and the importance of recording significant events in children's lives. Strengthening this approach would support staff to respond proactively to children's changing needs.

Mealtimes provided opportunities for independence and social interaction. Children made choices about what they wanted to eat, self-served fruit independently, poured drinks, spread toppings, and cleared away their dishes. More consistent use of mealtimes as opportunities for meaningful discussion would further support children's wellbeing, communication skills, and relationships. Floor books evidenced children had previously been more involved in snack preparation. Moving forward, it would be beneficial to consider developing a consistent approach to children's involvement. Planned developments to increase the range of healthy snack options were positive and should be monitored to ensure children continue to have access to varied and nutritious choices. This would ensure children's nutritional needs continue to be met and that meal experiences remain enjoyable and responsive to children's preferences.

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

Requirements

Requirement 1

By 27 June 2025, the provider must ensure that all children and families are safe. To do this, the provider must, at a minimum, ensure:

a) appropriate outdoor lighting is provided to guide people leaving the service through the school grounds
b) exits from the hall are alarmed or locked.

This is to comply with Regulation 4(1)(a) and 10(2)(c) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 011/210).

The timescale has been extended to 5 December 2025.

This requirement was made on 5 February 2025.

This requirement was made on 5 February 2025.

Action taken on previous requirement
The service had installed lighting and plans were in place with the local authority to monitor their continued effectiveness. There was sufficient light to maintain children and families safety as they entered and exited the club.

All exits from the hall were locked and alarmed. Children did not exit these unless with a member of staff or appropriate adult. Alarms were reviewed and checked regularly and replaced to keep children safe and secure.

Met - outwith 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 improve outcomes, the provider should support staff access further training, professional development and apply their learning in practice. This should include, but is not limited to promoting positive relationships and behaviour training.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled.' (HSCS 3.14).

This area for improvement was made on 5 February 2025.

Action taken since then

Staff had accessed a variety of training including first aid, child protection, food hygiene, positive relationships and autism awareness. They were beginning to evaluate their training to consider the impact on their practice. Staff spoke positively about training attended. The provider had plans in place to support future professional learning and development for staff.

This area for improvement had been met.

Previous area for improvement 2

To support children's wellbeing, personal planning should be improved to ensure plans reflect each child's current needs and sets out how these needs should be met. Plans should be developed in partnership with parents and children (where appropriate). Where children have identified support strategies in place, all staff caring for those children should have an understanding of how to meet children's individual needs. Staff should also be skilled at putting any strategies into practice.

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 1.15).

This area for improvement was made on 5 February 2025.

This area for improvement was made on 5 February 2025.

Action taken since then

All children had a personal plan in place and these were developed and reviewed in partnership with children and their families where appropriate. Staff were developing their awareness of the strategies in place to support children's individual needs. Staff were knowledgeable of children's personalities and individual circumstances. This helped them to provide consistent care and support.

This area for improvement had been met.

Previous area for improvement 3

To prevent the potential spread of infection, management and staff should ensure effective regular handwashing is taken place by children.

This is to ensure the quality of the care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

This area for improvement was made on 5 February 2025.

This area for improvement was made on 5 February 2025.

Action taken since then

Children and staff were observed washing their hands at regular intervals. This included as they entered the service and before snacks. Families were observed encouraging their children to participate in following these procedures which helped to embed good hygiene.

There was scope to continue to improve children's handwashing as they returned from outside and after eating snack. The service quality assurance processes would further support staff to monitor effective hand hygiene.

This area for improvement had been met.

Previous area for improvement 4

To support children's wellbeing, the provider should improve toilet spaces for children. Toilets should be well ventilated, suitably heated and in a place which is within easy reach of children to promote their independence.

This is to ensure the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes.' (HSCS 5.18).

This area for improvement was made on 5 February 2025.

This area for improvement was made on 5 February 2025.

Action taken since then

Toilets were clean, ventilated and procedures were in place to enable children to access these. Staff communicated using walkie talkies to support children use the toilet when outdoors. We asked that staff continue to monitor the space to ensure that it is ready to use as children arrive at the club.

This area for improvement had been met.

Previous area for improvement 5

To support positive outcomes for children and families, the service should continue to develop and build a cycle of continuous improvement. This should address the areas that management, staff, parents and children feel need most improved, including monitoring and supporting staff practice.

This is to ensure the quality of the 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 5 February 2025.

This area for improvement was made on 5 February 2025.

Action taken since then

The service was beginning to develop quality assurance processes and had identified meaningful service improvement priorities. We discussed embedding and revisiting monitoring and quality assurance processes to support sustained improvements across the service. This would include meaningfully involving families in the service improvement journey.

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
Staff skills, knowledge, values and deployment	4 - Good

Children thrive and develop in quality spaces	4 - Good
Children experience high quality spaces	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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