Allsorts Childcare Centre
Day Care of Children

Duns Primary School
Langtongate
Duns
TD11 3QG

Telephone: 07436797945

Type of inspection:
Unannounced

Completed on:
12 August 2026

Service provided by:
Allsorts Childcare Centre Ltd

Service provider number:
SP2005007864

Service no:
CS2005109544

About the service

Allsorts Childcare Centre is registered to provide a care service to a maximum of 26 children at any one time, aged from 3 years up to attending S1 during term time.

When the service has access to the space adjacent to the playroom during term time, the care service may be provided to a maximum of 50 children aged from 3 years up to attending S1.
The care service may be provided to a maximum of 50 children at any one time aged from 3 years up to attending S1 during school holidays. There was a total of 11 children present on both days of the inspection.

Allsorts Childcare Centre, is situated within Duns Primary School in the rural town of Duns in the Scottish Borders. The club has use of a specific playroom, gym hall, games room and toilets within the main school building. Children have access to the outdoor play area at the rear of the building.

About the inspection

This was an unannounced inspection which took place on 06 August and 10 August 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 feedback from six parents and carers whose children attend the service
- reviewed feedback from four staff members employed in the service-
- spoke with management and staff
- observed practice and staff interactions with children
- 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, improvements were identified relating to core assurances. We have reported where improvement is necessary within the 'Leadership' section of this report

Key messages

- Children were happy and confident, with friendships supporting children's wellbeing.

- Welcoming and kind interactions from staff supported positive relationships.

- Children, families, staff and the board should review and adapt the club vision, values and aims to reflect the new aspirations held for children.

- Quality assurance processes would benefit from further development to consistently support children's health, safety and wellbeing.

- The provider needs to consider the professional development of all staff and promote a culture of continuous learning and improvement.

- Further consideration should be given to the availability of resources and the development of loose parts play to ensure it effectively meets the needs and interests of children.

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

Leadership and management of staff and resources

We evaluated this quality indicator as good were several strengths impacted positively on outcomes for children and clearly outweighed the areas for improvement.

The service's vision, values and aims were shared with children and families through correspondence and social media. The manager recognised that these needed to be reviewed and updated. They understood that involving children and families in this process would help ensure the vision, values and aims reflected what was important to them. This would help children and families feel listened to and valued, and helped ensure the service focused on their needs and experiences.

Quality assurance and self-evaluation processes were beginning to support improvements, with positive developments noted in personal planning and medication management. The manager provided staff support through modelling good practice and one-to-one meetings. This helped staff develop skills and promote children's health, safety and wellbeing. Quality assurance processes need to become fully embedded to help ensure improvements were maintained and children continue to receive safe, consistent, high-quality care and support. While the service continues to make progress in strengthening its quality assurance systems, this area for improvement will be carried forward to support further development **(See section 'What the service has done to meet any areas for improvement we made at or since the last inspection).**

Families were able to share feedback through questionnaires and informal discussions. While the current development plan focused on addressing previous requirements and area for improvement, the manager should now implement a more strategic improvement plan with clear priorities, actions and outcomes. Focus should include staff roles and responsibilities, professional development, resources and planning. The service was signposted to the Quality Improvement Framework for School-Aged Childcare to strengthen self-evaluation and continuous improvement.

The service carried out safer recruitment processes but these could be further strengthened by having all pre-employment checks clearly documented and recorded. This would help make sure children were cared for by suitable staff and support their safety and wellbeing. All staff had an induction and some spoke about the good mentoring system in place. This meant the area for improvement around staff induction made at the last two inspections was met.

Staff felt supported by both colleagues and the manager, this contributed to a positive working environment where staff felt valued and able to work together. Appraisals and one-to-one meetings took place, but not consistently due to time and resource pressures. Greater consistency in these arrangements would support staff to receive regular guidance, understand their roles and responsibilities and access professional development opportunities. Team meetings needed a clear agenda and detailed minutes to support effective communication, accountability and shared learning. This would improve consistency of practice and outcomes for children.

Some staff professional development had taken place and further assurance was given by the provider regarding ongoing investment in staff development. This included protected time for supervision sessions, appraisals, team meetings and professional learning opportunities. The provider should support the manager to access a suitable training course to meet the qualification condition linked to their Scottish Social

Services Council (SSSC) registration. The provider also needed to demonstrate appropriate oversight of the manager through regular supervision, check-ins and appraisal arrangements. This would help support accountability, effective leadership and the continued development of the service.

We discussed the importance of the service remaining mindful of the notifications that must be submitted to the Care Inspectorate. Additional board members had recently been appointed, and their details need to be uploaded to the Care Inspectorate portal. This would support compliance with Care Inspectorate and ensure records remained accurate and up to date.

Children thrive and develop in quality spaces — 4 - Good

Quality indicator - Children experience high quality spaces.

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 setting had its own playroom within the local primary school. Children were familiar with the environment. Club noticeboards and art displays provided a sense of ownership and belonging. The entrance to the club was untidy with children's coats and bags lying in a heap. This needs to be organised into a welcoming and respectful area for children to store their belongings.

The layout of the playroom supported children's choice and independence. Children were able to choose from resources and activities and decide how they spent their time. For example, some children chose to take part in painting activities, drawing and others were involved in the small word resources including the dolls house and animals. This resulted in children experiencing good quality play experiences that reflected their needs and interests.

Staff monitored entrances, exits and outdoor areas and completed regular headcounts. They used walkie-talkies to communicate effectively about children's whereabouts. The service should ensure there were enough supplies of walkie-talkies, as these were vital in supporting children's safety and effective supervision. The service made good use of the outdoor space and children spoke positively about playing outside. Access to the school playground and trim trail promoted active play and supported children's physical wellbeing. Children were engaged in imaginative play, pretending to be zoo animals and had created an enclosure using a tarpaulin. This supported their creativity, imagination and demonstrated that their ideas and interests were valued by staff.

Staff provided opportunities for children to learn about their wider environment and had planned a variety of visits through the summer holiday club. This included going to the beach, bug hunting, visits to the fire station, police station, library and park. This meant children had opportunities to connect with their local community in a way that promoted their learning, physical skills and wellbeing.

Arrangements for the safe storage and processing of children's personal information was well managed in line with relevant guidance and best practice. Staff fully understood their roles and responsibilities in relation to effective record keeping and the management of children's information.

We discussed the maintenance of the room, which was the responsibility of the school. Several areas required attention, that included damaged cupboard doors and the need to repaint and refresh the room and sink area. These issues had previously been raised with the school; however, no improvements had been made. We discussed the importance of the provider raising these matters again to help ensure the

environment remained safe, welcoming and well maintained for children.

The manager could further develop quality assurance processes to include monitoring the cleanliness of the setting. Greater oversight of cleaning routines would support a consistently clean and hygienic environment. This could include food preparation areas being cleaned and wiped down after use, and equipment being kept clean and well maintained. This would support good hygiene practices and contribute to a safe environment for children.

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, confident and fully engaged in their play for sustained periods of time. Children were drawing, painting and colouring. Others told us they liked 'crafting and colouring' together. These creative approaches supported children's imagination and encouraged them to explore ideas through play.

Warm, supportive interactions supported children and helped them to try new experiences. As a result, children were following their interests and had fun. Children's achievements were recognised and celebrated through genuine praise and encouragement, which helped to build confidence and self-esteem. Some staff promoted positive relationships and interactions which was reflected in how children played together.

Children were observed enjoying a variety of activities that promoted fun, learning and development. For example, craft table, construction toys, books and games were available, which catered for children's differing abilities, needs and interests. This helped ensure children could make meaningful choices about their play experiences. Resources were easily accessible and children were confident in asking staff for support or help.

Planning had been a key focus for the staff team. Information gathered from parents had been used to inform activities that reflected children's interests. The service had been reviewing and developing planning approaches to include observations of, and conversations with, children. This had supported staff to gain a better understanding of children's preferences and ideas. Displays of children's artwork throughout the room reflected their participation and achievements. We discussed how the service could further develop planning by strengthening children's involvement in shaping their play and experiences. This would support a more child-led approach and help staff identify experiences that were meaningful, engaging and appropriately challenging for children.

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.

Staff created a nurturing and respectful environment where children felt secure, valued and included. Interactions were warm and responsive, which supported children's emotional wellbeing and sense of

belonging. Staff helped children to settle-in by taking time to chat with them as they arrived and joining in their play. We have asked the service to review the support for the younger children especially those who are just starting and do not know the routine. This would further support children to feel safe and reassured.

Staff had reviewed the playroom and created different zones for the ages of the children attending. This supported them to have their own space. There was a welcoming cosy area that promoted children's wellbeing and supported self-regulation. As a result, children had access to a quiet space where they could relax and manage their emotions in a way that met their individual needs.

Children's mealtimes were relaxed and sociable. Children had opportunities to sit with friends and access snacks flexibly in line with their preferences. During the holiday club, children brought packed lunches from home. Some areas for improvement in mealtime practice need considered. These included encouraging children to remain seated while eating, making drinking water and cups more readily available, and providing additional support for younger children who were unfamiliar with routines. The healthy eating policy could be reviewed and shared with families to promote consistent messages about healthy choices. Further use of the 'Setting the Table' best practice guidance could help enhance children's mealtime experiences.

Personal plans were in place for all children. Simplified plans were used during holiday club. However, all plans reflected children's individual needs, preferences and routines. Chronologies and Care Plan Plus documents were available for children who needed additional support. Plans were reviewed regularly to ensure information remained current and relevant. The service should continue to evaluate the effectiveness of support strategies to ensure they were supporting children's individual progress, wellbeing and outcomes.

Medication was stored appropriately, and relevant information was available to support its safe administration. Further development of quality assurance arrangements would support consistency between information recorded in children's care plans and the medication held on the premises. Consideration could also be given to introducing a more detailed medication audit process. This would help strengthen oversight of medication procedures and provide additional assurance that children's healthcare needs continue to be supported effectively.

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 promote consistently positive outcomes for children the provider and manager should develop an effective quality assurance, auditing and self evaluation system to evaluate the quality of the provision. This would support the service to plan and make improvements that have a positive impact on children's experiences.

This is to ensure that management and leadership is consistent with 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 6 February 2026.

Action taken since then

Quality assurance and self-evaluation processes were beginning to support improvements, with positive developments noted in personal planning and medication management. The manager provided staff support through modelling good practice and one-to-one support. This helped staff develop skills and promote children's health, safety and wellbeing. However, quality assurance processes need to become fully embedded to help ensure improvements were maintained and children continue to receive safe, consistent, high-quality care and support.

An improvement plan had been developed in response to requirements and areas for improvement identified at previous inspections. The plan could be further developed to clearly identify priorities and planned developments for the coming year. This would support a structured approach to continuous improvement and help sustain positive outcomes over time.

This area for improvement is not yet met and will be carried forward into this report.

Previous area for improvement 2

To ensure children receive high quality care, play and learning the provider should implement and embed a robust and effective induction that ensures consideration is given to children's care, play and learning needs.

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, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 6 February 2026.

Action taken since then

The induction process has been reviewed. The manager has asked for staff's input into the review process and used their feedback to make changes. The service have agreed to develop this as the service becomes more established.

This area for improvement is 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 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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