Community Central Hall - Safe Til Six
Day Care of Children

304 Maryhill Road
Glasgow
G20 7YE

Telephone: 01413 317 669

Type of inspection:
Unannounced

Completed on:
15 September 2026

Service provided by:
Community Central Hall

Service provider number:
SP2007008922

Service no:
CS2007144691

About the service

Community Central Hall - Safe Til Six is registered to provide day care to a maximum 89 school age children up to 14 years old. The service is located within Community Central Hall in the Maryhill area of Glasgow. It is situated close to local shops, amenities, and public transport links.

Children have access to a main playroom space, further hall spaces within the Community Centre and a near by wooded area for outdoor play. At the time of inspection 43 children were present on the first day and 46 children were present on the second day.

About the inspection

This was an unannounced inspection which took place on 15 and 16 September. 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
- spoke with five families
- reviewed electronic feedback from 15 families
- spoke with staff, management and Head of Place and Engagement
- observed practice and daily life
- reviewed documents
- assessed core assurances.

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 the 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 'Children thrive in quality spaces' section of this report.

Key messages

- Staff were warm, kind and caring in their interactions.
- Children were happy, having fun and engaged in play experiences.
- Self-evaluation was contributing to positive outcomes for children.
- Leaders should continue to embed auditing and monitoring processes.
- The provider should ensure outstanding maintenance issues are addressed.

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	3 - Satisfactory / Adequate
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, where there were important strengths within the settings work and some aspects that could benefit from improvement.

The service had recently reviewed and updated its vision, values and aims in consultation with children, parents and staff. This made them meaningful and relevant as they reflected the views of those experiencing and delivering care. There was a key focus on providing a happy, secure and stimulating environment for children. We found this reflected in the service's ethos and daily practice. Children were settled, engaged and enjoying their time at the service, supported by staff who created a welcoming and safe environment.

Leaders had established approaches to self-evaluation and continuous improvement. Ongoing self-evaluation was informed by the Care Inspectorate Quality Framework and provided a clear focus for service development. Staff meetings created regular opportunities for the whole team to come together, reflect on what was working well and identify areas for improvement.

This had led to positive changes, including improvements to the layout and resourcing of the indoor environment. Leaders were able to describe the positive impact these changes had on children's play and learning. We observed children who were happy, engaged and actively involved in their chosen play experiences.

A range of approaches to gather the views of staff, children and families were in place. These included suggestion boxes, questionnaires, voting systems and daily conversations. This provided everyone with regular opportunities to influence the service. Information gathered through consultation was discussed at staff meetings and acted upon where appropriate.

The service made efforts to demonstrate how feedback had informed change by displaying photographs of improvements alongside comments from children and families in a big book. This meant children and families could see that their views were valued and had contributed to the development of the service. The manager also shared plans to further strengthen feedback processes through the use of newsletters.

Leaders had introduced a quality assurance calendar to monitor key aspects of the service. This included personal plans, accidents and incidents, self-evaluation activities and playroom practice. Overall quality assurance processes were beginning to have a positive impact on outcomes for children. For example, monitoring of playroom practice had supported improvements in staff deployment and interactions. This contributed to children being supported, engaged and enjoying their time in the service.

We found attention to detail was needed to support consistency in some recording and documentation. This included quality and consistency of information recorded in personal plans, medication forms and appraisal processes. Moving forward, the manager should now continue to embed quality assurance arrangements to support sustained improvement across the service.

Staff recruitment practices were in line with safer staffing guidance. Appropriate pre-employment checks had been completed and staff were registered with the relevant professional bodies. Newer staff spoke

positively about their recruitment and induction experiences which they found reassuring and supportive. This helped staff settle into their roles and contributed to a consistent approach to children's care and support.

Staff skills, knowledge, values and deployment

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

The manager was working collaboratively with another manager from within the provider group. This provided valuable opportunities for shared learning, reflection and professional development. The manager shared this, along with participating in higher qualifications were contributing positively to their leadership skills and confidence.

Staff appraisals were in place and provided opportunities to identify strengths, recognise achievements and discuss training and development needs. This supported staff to reflect on their practice and consider their ongoing professional learning. We discussed with leaders the importance of developing more detailed appraisal discussions and recording. Strengthening this aspect of the process would help leaders to better identify and respond to staff's changing professional development needs.

Staff had access to a range of professional learning opportunities to support their knowledge and skills. They were able to describe training they had undertaken and explain how this had influenced their practice and improved outcomes for children.

For example, staff shared how learning about play had enhanced their ability to support child led experiences. They discussed knowing when to step back to give children autonomy to lead their own play and when to join in to support and extend play. Another staff member told us how autism awareness training had increased their understanding of how to meet individual children's needs. They described adapting their approaches and interactions to better support children, helping to create a more inclusive environment.

Staff deployment reflected individuals' skills, knowledge and experience. Experienced staff worked alongside newer team members, providing support and guidance through buddy arrangements both indoors and outdoors. This contributed to a consistent approach to practice and helped staff feel confident in their roles. This contributed to continuity in the support children received for their play, learning and wellbeing.

We observed ongoing communication between staff throughout the session. Staff regularly shared information about children's whereabouts, collection arrangements and attendance at outdoor activities. This helped maintain children's safety and continuity of care. Systems such as the staff communication book supported the sharing of key information across the team. This meant staff were kept well informed and contributed to positive transitions and experiences for children.

Children thrive and develop in quality spaces — 3 - Satisfactory / Adequate

Children experience high quality facilities

We evaluated this quality indicator as satisfactory/adequate where strengths just outweighed the weaknesses.

Children were cared for in a secure environment within the community centre. Access to the service was controlled through a keypad entry system, and visitor sign in procedures were consistently followed. Registers and whiteboards were updated throughout the session enabling staff to account for children at all times. This helped minimise risks and supported children's safety.

Children spent most of their time in areas of the service that had undergone some refurbishment and decoration. These improvements contributed to a welcoming, safe and hygienic environment where children could play, relax and socialise comfortably. The provider recognised that some aspects of the premises required further improvement. Parent feedback also demonstrated this. Some of their comments included, "The building isn't the nicest and is quite damp smelling. I can't fault the staff but the building massively let's this facility down" and "The building floor has seen better days."

The provider gave assurances this was a priority and shared plans were in place to address outstanding maintenance issues. This included worn hallway areas and upgrades to some bathrooms. We discussed the importance of completing these longer term improvements to enhance children's experiences and the quality of the environment. Further information on maintenance issues can be found in the outstanding areas for improvement section of this report.

Indoor spaces had been thoughtfully arranged to provide children with opportunities to play independently or with their friends. Children were able to move freely between areas and choose spaces that supported relaxation, creativity and social interaction. The environment was well resourced, enabling children to make choices about how they spent their time. We observed children enjoying imaginative play as they dressed up and created their own games and scenarios. As a result, children were engaged, having fun and experiencing play that reflected their interests and choices.

Opportunities for outdoor play were limited by the absence of a dedicated outdoor area with direct access from the service. Outings records showed daily opportunities were in place to spend time in the local community. However, discussions with some children and parents indicated that they were unsure how regularly children accessed outdoor experiences.

We advised the service to monitor and track individual children's access to outdoor play. This would support staff to better understand each child's frequency of outdoor experiences and identify any children who may benefit from increased opportunities. This would help put plans in place to support all children to regularly enjoy the benefits of outdoor play and learning.

The near by wooded area provided opportunities for children to lead their own play, develop confidence and engage in risk and challenge. This offered activities such as climbing, balancing, using cable reels and a tyre swing. Staff supported children to identify, assess and manage risks, helping them to develop skills while staying safe. Several children told us going to the woods was their favourite thing to do. One commented "I like the wood best. We play hidey tag and we climb."

Children play and learn 4 - Good

Playing, learning and developing

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

Children were relaxed, engaged and having fun during their play and learning. They confidently led their own play and made choices about resources and activities that interested them. Staff supported children to make choices by responding to requests and using photographs of available resources, enabling children to access and direct their own play. This supported children's independence, decision-making and enjoyment.

Children had developed positive friendships with peers from different schools. This helped them feel included, build social skills and develop confidence in group settings. Children were supported to take part in collaborative experiences, such as, floor is lava (team game), playing pool and building a den with large construction. These experiences offered appropriate challenge and encouraged children to work together, solve problems and think critically. This strengthened relationships between children and developed their confidence.

Children spoke positively about their experiences. Some of their comments included:

"I love seeing my friends from different schools. I like going outside to play."

"It's fun. I like the blocks, pool and the Wii playing Mario Kart."

"I like dressing up. I love the long dresses. They are swishy."

Staff engaged children in conversations that supported their learning and development. Some staff used questioning and commentary to encourage children to think, problem-solve and extend their learning. For example, staff asked questions such as, "What do you need?", "What will we do next?" and "What number comes next?" to promote thinking and language development. We shared with leaders some staff would benefit from further development of their ability to challenge and extend children's learning and play opportunities. This would promote consistency in children's learning and play experiences.

Planning for children's play and learning was responsive to their interests, ideas and experiences. Children's suggestions and meaningful events in their lives, such as the Commonwealth Games, were used to inform planned experiences. This helped make learning relevant and engaging for children. One parent commented that these experiences provided valuable opportunities for children from different schools to come together and share in a sense of celebration and belonging. As a result, children were supported to develop a sense of community, build positive relationships and feel valued within the service.

Learning was shared with families through daily conversations and stay-and-play sessions. This helped families remain informed about their child's experiences and learning. We identified opportunities to further develop how children's play and learning is shared with families. For example, through floor books, learning journals or newsletters. This would support families to gain a broader understanding of children's experiences, achievements and progress within the service. Leaders agreed and were keen to re-establish newsletters and create a floor book.

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 settings work and some aspects that could benefit from improvement.

Staff were warm and friendly in their interactions. Children were relaxed, settled, and comfortable in their care. Staff responded to children consistently with kindness and patience. This supported positive relationships between children and staff. Parents commented positively about this children's relationships with staff. They shared "My child loves them all" and "My children are close with staff. My children talk about them at home. They love them and staff are kind to them."

Personal plans were in place and contained key information to meet children's individual needs. Children had opportunities to contribute to their plans by sharing their likes, dislikes and the support they needed. Some plans had been updated to reflect changes in support needs, for example where a child no longer required assistance with a specific task. However, this was not consistently reflected across plans we sampled. We discussed the importance of a more consistent approach to recording information. This would ensure children's current needs, progress and outcomes are accurately reflected.

Plans contained wellbeing assessments linked to wellbeing indicators. This provided opportunities to identify children's strengths and where support was needed. We found this was also being used to update significant changes. We suggested the addition of a significant changes sheet. This would provide a chronological account of important changes in children's lives and provide staff with information to respond to children's changing needs.

Snack was relaxed and unhurried, supporting children to enjoy their food and make choices about when they ate. Flexible snack arrangements minimised disruption to play and allowed children to follow their interests. Children's independence was promoted through self-serving and tidying away after snack. Staff sat with children, ensuring safety and engaging them in meaningful conversations, which helped create a positive and social experience.

We discussed opportunities to further enhance the snack experience. This included considering access to snacks during woodland sessions and offering a wider range of options for children with dietary requirements. On the second day of inspection snack items were taken to the woods. We suggested sharing the snack menu with families. This would help raise awareness of the range of foods available and support children to make informed choices. Leaders agreed and made plans to introduce this immediately.

Relationships with children and families were important to the service. Families were warmly welcomed and staff spent time chatting with families to share information of children's day. Further opportunities for family engagement were supported through planned events such as, stay and play sessions. One parent commented, "All staff are always welcoming and friendly when I collect my [child] and pass on information about their time. They are very approachable if I need to ask about anything." This supported positive relationships and strong communication between staff, children and families.

Overall medication was stored and administered safely. We identified some inconsistencies in medication records and labelling. These were addressed before the end of inspection. This provided staff with clear and accurate information to follow, helping support children's health, safety and wellbeing.

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 for children, the provider should ensure that self-evaluation and quality assurance impact on improved experiences for children. This should include, but not be limited to, robust auditing and monitoring of staff practice.

This is to ensure that 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 16 February 2026.

Action taken since then
Ongoing self-evaluation and quality assurance processes were in place and had led to positive improvements for children, including enhancements to the playroom environment and resources. Formal and informal monitoring, including peer observations, supported staff reflection and practice development. This had resulted in improved engagement and interactions between staff and children during play.

Therefore we were satisfied this area for improvement had been met.

Previous area for improvement 2

To ensure children are safeguarded, the provider should ensure that the manager and staff have the necessary skills, knowledge, and experience through appropriate child protection training and learning opportunities.

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 3.20); and
"I am protected from harm because people are alert and respond to signs of significant determination in my health and wellbeing, that I may be unhappy or may be at risk of harm" (HSCS 3.21).

This area for improvement was made on 16 February 2026.

Action taken since then
Staff had participated in additional safeguarding training and clear child protection procedures were displayed within the staff area. Through our discussions, both established and newer staff demonstrated an understanding of their responsibilities in keeping children safe. This included actions they would take if they felt concerns were not being appropriately escalated. This provided assurance that staff were knowledgeable about safeguarding procedures. This promoted children's safety and wellbeing.

Therefore we were satisfied this area for improvement has been met.

Previous area for improvement 3

To support children's health, wellbeing and safety, the provider should ensure children are cared for in a safe and well-maintained environment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.24).

This area for improvement was made on 16 February 2026.

Action taken since then

Action had been taken to address odour and dampness within the hallways through the use of dehumidifiers, heating systems and air neutralising products. While the hallway flooring remained worn and subject to temporary repairs, we were satisfied this did not present an immediate risk to children's safety.

We were informed the provider was actively exploring funding opportunities to address outstanding maintenance issues. Plans were in place to replace flooring, upgrade some toilet facilities and reline the water tank. These developments provided reassurance that longer term improvements to the premises were being progressed.

Therefore we were satisfied this area for improvement had been met.

Previous area for improvement 4

To support children's health, development and wellbeing, the provider and manager should review the approach to outdoor learning in and beyond the setting. This should include, but not be limited to, ensuring children have access to quality outdoor physical play in the fresh air daily.

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 play outdoors every day and regularly explore a natural environment' (HSCS 1.32).

This area for improvement was made on 16 February 2026.

Action taken since then

While funding was not currently available to develop the outdoor area behind the community centre, there were daily opportunities to access outdoor play spaces. Records demonstrated regular visits to local woods and parks within the community.

During holiday periods, children and staff also made good use of free bus travel to visit a wider range of outdoor spaces across Glasgow. We were satisfied that children had opportunities to access outdoor play and meaningful opportunities to explore their wider community.

Therefore we were satisfied 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
Staff skills, knowledge, values and deployment	4 - Good

Children thrive and develop in quality spaces	3 - Satisfactory / Adequate
Children experience high quality spaces	3 - Satisfactory / Adequate

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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.scot

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.gov.scot

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.